

Women Returners Training Agreement

Section 1: Participant Details

| | |
|-----------------------------|---|
| First Name | |
| Middle Name | |
| Last Name | |
| Date of Birth | |
| NI Number | |
| Mobile Phone Number | |
| Home Phone Number | |
| Email Address | |
| Preferred Method of contact | Email (Email must be selected for validation purposes) |
| Postcode | |
| Street 1 | |
| Street 2 | |
| Town / City | |
| Area of Scotland | Lowlands and Uplands Highlands and Islands South of Scotland |

Section 2: Training details

| | |
|--|---|
| Name of Training Provider | |
| Start Date | |
| Expected End Date | |
| Planned Activity <i>(Please tick only one which is the main focus of the planned activity)</i> | |
| Mentoring Upskilling Networking IT skills Work placement appropriate to previous employment history | Peer support Confidence building Signposting to advanced provision CV building Other |

Section 3: Participant History and Status

How long unemployed at start of training
26 to 51 weeks 52 to 77 weeks
78 to 103 weeks 104 weeks +

Highest level of SCQF held

Referred by

College

DWP

Local Authority

SDS

Training Provider

Section 4: Work Placement

Planned work placement

Yes No

Job Title

Work placement start date

Work placement end date

Employer contact name

Employer company name

Employer contact telephone

Address line 1

Employer contact mobile

Address line 2

Employer contact email

Address line 3

Post Code

Section 5: Benefits

Are you in receipt of benefits?

Yes No

Section 6: Declarations

INFORMATION FOR THE PARTICIPANT AND THE PARTICIPANT ACKNOWLEDGEMENT, COMMITMENT AND DECLARATION TO SDS

The Women Returners Programme is funded by The Skills Development Scotland Co Ltd ('SDS'). SDS strive to deliver excellent services and therefore are keen to know about any concerns you may have. If you are aware of activities that may have an adverse effect on SDS services, please use the [Customer Complaints Form](#) to raise your concern.

This section explains:

- how SDS will use your personal data
- your requirement to co-operate with SDS, and
- the eligibility criteria you must meet to start as a Participant

Information Accuracy and Exchange

Some information about you must be passed to us by people like the Provider. We explain why in our Privacy Notice about the Programme on our website. The information includes the information set out in this Training Agreement, details of your Learning Plan progress towards completion, your records of work related to your training, and what you do after your training finishes. We call this the "relevant information". We may share it with other bodies, as described in our Privacy Notice.

- I confirm I have read and understood this section of the Training Agreement entitled "Information accuracy and exchange" and acknowledge that the relevant information will be passed to SDS and used as described in its Privacy Notice for the Programme, and
- I declare that the information in pages 1, 2 and 3 of this Training Agreement is accurate.

Co-operation

SDS or SDS's partners or agents may contact you by text message, post, email or phone, or meet you directly to:

- monitor your Provider's compliance.
- monitor your Provider's quality assurance.
- monitor validation of your Provider's claims for payment.
- develop policy about skills training.
- discuss matters connected with your training.

I confirm I have read and understood this section of the Training Agreement entitled "Co-operation" and;

- a. agree to co-operate with SDS and any of SDS's partners or agents who may contact me to assist SDS and SDS's partners in the monitoring, audit and evaluation of the Programme and its impact.
- b. agree to co-operate fully with SDS (and SDS's agents) in response to any reasonable request for information about my participation in the Programme, to help SDS to monitor the Provider's compliance and quality assurance, measure outcomes and to assist with policy development.

Eligibility for participation

To participate in the Women Returners Programme, you must meet certain minimum criteria which are set out in this section. Your Provider must explain them to you.

I confirm I have read and understood this section of the Training Agreement entitled "Eligibility for participation" and declare that;

- a. the Provider's Representative named in Section below has explained and discussed the eligibility criteria that apply to me in the Programme.
- b. at the date I start the Programme, the following are true and accurate:
 - I am a woman
 - I am aged 25 or over
 - I have been unemployed for at least the last 6 months
 - I have been employed in the past
 - I am able to participate fully in the Women Returners programme and attend as required by the Provider
 - I live in Scotland

I am not:

- subject to an employment restriction on my stay in Great Britain
- subject to a funding restriction on my stay in Great Britain that would apply to the Women Returners Programme
- in custody as a prisoner or on remand in custody
- on any other employment, education, training or enterprise programme funded by any UK and / or Scottish Government department and / or SDS (subject to any exceptions published by SDS from time to time)

| | |
|-----------------------|------|
| Participant Name | Date |
| Participant Signature | |

INFORMATION FOR AND SIGNATURE OF THE PROVIDER

On behalf of the Provider, I:

- i. declare that this Training Agreement has been completed in consultation with the Participant, and that the details are correct.
- ii. declare that I have explained to the Participant all the eligibility criteria in the Women Returners Programme Specification.
- iii. declare that I am satisfied that at the date of my signature below, the Participant confirmed that they met all the eligibility criteria.

| | |
|------------|-----------|
| Print Name | Signature |
| Position | Date |