

Welcome to Riverside Training. This form has been designed so that we can gather some information about you, what you have done in the past and what you would like to do in the future. Your training starts here!

About you

Don't be daunted by this form, we just need to find out a little about you so that we can help with your training needs. Throughout the form you will find handy tips to help you fill in the right details.

The information you provide will only be used in such a way as to support your application for training. Information provided is stored in accordance with the Data Protection Act 1998. Riverside Training is an Equal Opportunities Training organisation.

First Name(s)	Age
Surname	Nationality
Date of Birth	National Insurance Number
Address	Emergency Contact Full Name
	Emergency Contact Telephone Number
	Emergency Contact Address
Post Code	Post Code
Contact Telephone Number	
Email Address	

About what you've been doing recently

This section gives you an opportunity to put down some information about what you have been doing for the last few years. This can include education, employment or training. Please list information in date order with the most recent first.

Name and address of School, College or Employer	Dates: From - to	Subjects studied and qualifications / grades if you were in School, College or Training and / or main responsibilities if you have been in employment

Please feel free to fill in as much or as little detail as applicable to you

About what you would like to do next

To help choose the right qualification for you, we work with all parties to find out the right level and occupational area and most importantly, listening to you to find out what you would like to do. Choosing the right area and level is also important, we will help find the right qualification that meets all your needs. Please tick any area(s) which you are interested in below:

Apprenticeships & NVQs

- | | | | | | |
|---------------------------|--------------------------|------------------|--------------------------|------------------------|--------------------------|
| Business & Administration | <input type="checkbox"/> | Customer Service | <input type="checkbox"/> | Hospitality & Catering | <input type="checkbox"/> |
| Management | <input type="checkbox"/> | Team Leading | <input type="checkbox"/> | Retail | <input type="checkbox"/> |

We can also help you by working closely with local employers. Riverside can provide personally negotiated programmes that meet your needs. Practices reflect current industrial standards using NVQs and a structured approach to learning at work. Regular support is given in the workplace to monitor and review your progress.

If you have a preferred company that you wish to work with or have approached a company. Please give us more details:

Don't worry if you don't know about where you would like to work, we will be more than happy to talk through this with you.

Health

It would be helpful if you could tell us if you have suffered from any health problems such as asthma/epilepsy/diabetes that may affect the type of work which you can undertake. If you have been affected by any of these or any other illnesses, please give details below:

How did you hear about Riverside Training?

- | | | | | | |
|-----------------------------|--------------------------|--------------------|--------------------------|---------------------------|--|
| Newspaper Advert | <input type="checkbox"/> | Job Centre Plus | <input type="checkbox"/> | Connexions | <input type="checkbox"/> |
| Riverside Training Open Day | <input type="checkbox"/> | Friend/Relative | <input type="checkbox"/> | School/College/University | <input type="checkbox"/> |
| Internet | <input type="checkbox"/> | Careers Convention | <input type="checkbox"/> | Other (Please specify) | <div style="border: 1px solid black; width: 150px; height: 30px;"></div> |

Equal Opportunities

- | | | | | | |
|----------------------------|--------------------------|---------------------------------|--------------------------|------------------------------|--------------------------|
| Bangladeshi | <input type="checkbox"/> | Mixed - White & Asian | <input type="checkbox"/> | Any other black background | <input type="checkbox"/> |
| Indian | <input type="checkbox"/> | Mixed - White & Black African | <input type="checkbox"/> | Chinese | <input type="checkbox"/> |
| Pakistani | <input type="checkbox"/> | Mixed - White & Black Caribbean | <input type="checkbox"/> | White - Any other background | <input type="checkbox"/> |
| Any other Asian background | <input type="checkbox"/> | White - Irish | <input type="checkbox"/> | Caribbean | <input type="checkbox"/> |
| African | <input type="checkbox"/> | White - British | <input type="checkbox"/> | Any Other | <input type="checkbox"/> |

Declaration

I certify that the information I have provided is both complete and accurate and I understand that false statements will disqualify my application.

Signed

Date