

**Supporting Teaching and Learning in Schools
City and Guilds Level 2 Award (5329)
Application form**

Applicant's Name _____

Date of Birth _____

Address _____

Postcode _____

Years resident in UK _____

Landline no : _____ Mobile no: _____

Email (*print very clearly*) _____

Start date applied for: October

February

(please tick)

**Do you have any previous teaching/training/support qualifications?
Give details here:**

List your other qualifications e.g. GCSE, A level (list subject and grade), professional qualifications.

Using a computer for your course work and electronic portfolio

You will have to present your word processed work in an electronic portfolio. You will be given an induction for this, but you must have access to a computer and a scanner in order to be able to complete the units of the course.

Can you confidently send an attachment by email? Yes/ No (Circle.)

Do you have access to a computer, a scanner and the Internet?

Yes/ No (Circle.)

INTERVIEWER - PLEASE RECORD

Assessment completed:

Offer/induction letter to be sent:

Notes: _____

Interviewer: (name+date) _____

State if you have any specific learning needs: (specific details)

Current practice/school/support experience

Please note you do not need to have any previous experience of supporting teaching and learning in a school for the Level 2 Award.

1/ If you are not working in a teaching and learning environment, complete this section:

Give the name and address of your employer (if applicable)

Responsibilities

Are you full or part time?

2/ If you work as a volunteer in a school, supporting teaching and learning please complete this section:

Give the name and address of the school

The number of hours that you support in a week

Roles and responsibilities in the school

If accepted on the course could you commit at least 3 hours a week, in addition to taught sessions to preparing a portfolio?	YES	NO
Why would you like to do this course?		

- **Prompt: Have you attached evidence of your qualifications? As if not, this can hold up your application.**

*Please return all forms and copies of all your qualifications **promptly** to:*

*Marta Knill, Teacher Training Manager
Uxbridge College
Park Road
Uxbridge, Middlesex UB8 1NQ*

Signature _____

Date _____