

Vocational/Work-based Learner Group: Expression of Interest



Please complete this form and return by email to:
learnergroup@Qualificationswales.org by Wednesday 22
September 2021

CONFIDENTIAL

PART ONE: Personal Details

Surname: _____

First Names: _____

Home Address:

Postcode:

Home telephone no:

Mobile No:

Email:

Date of Birth:

Age:

School/college/training provider/other (please explain):

Programme/course start date:

What qualifications are you currently taking?

Please ask your parent/carer/guardian* to complete this section of the form. * If you are aged 18 or above or if you are living independently and are aged 16-18 you do not need this permission:

I, _____ (parent/ guardian name)

Give my permission for _____ (young person's name) to:

- apply for this opportunity
- to attend the meeting dates
- submit this application form in written, or by video/voice recording

Qualifications Wales

Q2 Building, Pencarn Lane
Imperial Park,
Newport
NP10 8AR
☎ 01633 373 222



Cymwysterau Cymru

Adeilad Q2, Lôn Pencarn
Parc Imperial,
Casnewydd
NP10 8AR
☎ 01633 373 222

Date _____

*If you are living independently and are aged 16-18, just let us know this.

PART TWO: You can answer this section (page 2 and page 3) of the application form by **either:**

1. Writing a brief outline of why you wish to join the group, the vocational qualifications which you are taking and your experience of vocational/work-based learning (traineeship/apprenticeship).

No more than 500 words.

Or

2. **Submitting a video/voice recording** no longer than two minutes in length telling us about yourself and why you want to be a member of our group. You could use a file-sharing service like Dropbox to do this. Make sure you have your parents' / carers' permission if you are under 18. Please complete this box if you choose to do this:

Yes! I have submitted a video/voice recording. I have sent a link to download the video to learnergroup@Qualificationswales.org	Date message sent: Time message sent:
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Using the space below, or a video/voice recording, please tell us about:

1. Your **good communication skills:**
 - Explain why you think you will be good at taking part in discussions and sharing your views.
 - Tell us about a time when you used this skill.
2. What **challenges** do you think learners in Wales face?
 - How do these affect qualifications? This may be a recent personal experience or something you have learned about when helping a friend.
3. **Why** do you want to be a member of our Learner Group?

No more than 500 words.

PART THREE: Availability for meetings (Please note you will be expected to attend each meeting – 4 times a year from October to September)

Please **tick the boxes** below to indicate your availability for the following online meetings dates:

Date	12 October 5pm – 7pm	16 November 5pm – 7pm	February 2022	April 2022
Please tick box if you are available				

Is there is **anything else** you feel we would need to know about you so that you are able to attend our meetings? E.g., disability support.

Language preference

Preferred language of communication: Welsh English

Thank you very much for applying to become a member of our Vocational/Work-based Learner Group!

Please return your expression of interest either:

By email to: learnergroup@Qualificationswales.org

Or

Send a link to download your video to learnergroup@Qualificationswales.org

If you are sending a video/voice recording please remember to complete the box on page 2 and **REMEMBER TO SAY YOUR NAME CLEARLY** in your video/voice recording so we can match up your form.

POB LWC / GOOD LUCK.