

Empower Project Enrolment Form

Please complete using BLOCK CAPITALS



The Empower project is Lottery funded and focuses on supporting children under 12 with Autism, Dyslexia and Dyspraxia, their parents and the wider family circle.

Group Details

Group Name:

.....

1 Course Code*:

Course Title:

.....

Location:

Day of Class:

Class Time:

.....

2 Course Code*:

Course Title:

.....

Location:

Day of Class:

Class Time:

.....

*Course codes to be entered by admin

Personal Information

Surname:

Title:

Male

Female

.....

Forename(s):

Date of Birth:

/

/

.....

Home Address:

.....

.....

.....

Post Code:

.....

Telephone Number: Daytime:

Evening:

.....

E-mail Address:

Mobile No:

.....

Consent and Emergency Contact Information

If applicable, I give permission for my child to attend this course/event

Yes

No

.....

Emergency Contact: Name:

Telephone:

.....

Internal Use Only

Student Reference No:

Details Input to MIS by:

Date:

This form can be made available in alternative formats on request

As the project is Lottery funded, we need to provide an evidence base that we are reaching those who require assistance. This evidence is generated from the monitoring details below:

Learning Support

Do you wish to declare a learning support need? Yes No

Do you require any support in order to attend your chosen session Yes No

If so, please state:

Please contact the administration office to set up additional support if required on T: 028 7939 5237

Do you have a medical condition which may affect your participation on your chosen course? Yes No

If yes please give details:

Are your day to day activities limited because of a health problem or disability? Yes No

Please state the type of impairment which applies (tick all that apply)

Specific learning disability (dyslexia) Blind or partially sighted Deaf or hard of hearing

Mobility difficulty Autistic spectrum disorder Mental health condition

Unseen disability (diabetes/epilepsy) Dyspraxia

Do you have a family member with any of these needs or waiting to be diagnosed? (tick all that apply)

Autism Dyslexia Dyspraxia

ACCEPTABLE USER POLICY

You must read and agree to abide by the college's **ACCEPTABLE USER POLICY** to gain access to its computer systems. This is available for you to read at the point of enrolment or at www.nrc.ac.uk. By signing below, you agree to use the college's computer systems **FOR** educational purposes, and **NOT FOR** any illegal, offensive, malicious purpose or commercial gain, or in any way which threatens the security of the college's systems, or contravenes college regulations. By signing you also accept that the college may monitor your use of computer systems, prevent access to certain internet resources and terminate your access to systems if you engage in unacceptable use. Offences may also result in disciplinary or legal action. I have read and understood the college's Acceptable User policy and agree to abide by it.

DATA PROTECTION ACT

All personal data will be held in accordance with the Data Protection Act (1998). Your data will be shared with the Department for the Economy for statistical, funding, research and other legitimate business purposes including the provision of careers guidance. Your information may be accessed by other Civil Service Departments and government agencies. At no time will your personal information be passed onto organisations for marketing or sales purposes. I certify that the details on this form are correct, that I wish to enrol for the course listed and that when using College IT resources I will adhere to the Acceptable User Policy.

Learner's Signature:

Date: / /