



### Further Education and Training

CO-FUNDED BY THE IRISH GOVERNMENT AND THE EUROPEAN UNION UNDER THE EUROPEAN SOCIAL FUND

This form is designed to collect the information required by providers and funders to register learners, provide certification, establish eligibility for funding support, and facilitate follow-up with learners upon course completion and for use in statistical analysis of aggregate (non-personally identifiable) data. It facilitates the submission of accurate learner details to SOLAS the Further Education and Training Authority. While the course provider may support the learner in completing the form, the learner should sign off on the accuracy of the details provided and be provided with the Data Impact Statement.

## Learner Detail Form

Course Title: \_\_\_\_\_

PLSS Reference Number: \_\_\_\_\_

### Data Impact Statement

This notice is an overview of how your personal data will be treated. If you would like to learn more about the treatment of your personal data, please see the Data Protection Statement attached to this application.

### Acknowledgement

By applying for and/or attending a FET programme, I acknowledge that you may process my personal data (e.g. name, address, contact details, education) including sensitive personal data (where I opt to provide this information e.g. racial or ethnic origin) that you collect about me in connection with my application for and/or attendance on a FET programme and for purposes associated with coordinating, evaluating, funding and organising FET programmes and complying with European Union requirements for monitoring and reporting on its funding operations. I acknowledge that you may share my personal data (including my sensitive personal data where I opt to provide it) within your organisation and also with third parties in the FET sector as well as third parties monitoring and reporting on European Union co-funded operations. I acknowledge that I have reviewed the PLSS Data Protection Statement attached to this application form which sets out the full details regarding the processing of my personal data. I understand that I may also address any questions, comments and requests regarding your data processing practices at [kdonnellan@loetb.ie](mailto:kdonnellan@loetb.ie).

### Section 1: Personal Details

Name: \_\_\_\_\_

PPSN: \_\_\_\_\_

Address and Postcode/Eircode: \_\_\_\_\_

Term Address and Postcode/Eircode (IF DIFFERENT THAN PERMANENT ADDRESS): \_\_\_\_\_

Phone/Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Sex: Male  Female

Nationality: \_\_\_\_\_

Country Of Birth: \_\_\_\_\_

Emergency Contact(s): Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

FOR LEARNERS UNDER 18 ONLY:

Is the signed Parental Consent form attached?

Yes  No

Parent/Guardian Contact:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Section 2: Social Welfare Payments, Including Secondary Benefits or State Payments

Are you in receipt of a welfare payment or a dependant of a welfare recipient?  
(tick one only)

I am in receipt of a welfare payment

I am a dependant of a welfare recipient

None of the above

FOR LEARNERS IN RECEIPT OF A WELFARE PAYMENT ONLY:

What payment(s) are you in receipt of?  
(tick one or more)

|                                      |                          |
|--------------------------------------|--------------------------|
| Jobseekers Allowance                 | <input type="checkbox"/> |
| Jobseekers Benefit                   | <input type="checkbox"/> |
| Disability Allowance                 | <input type="checkbox"/> |
| Illness Benefit (over 6 months)      | <input type="checkbox"/> |
| Carer's Allowance                    | <input type="checkbox"/> |
| Farm Assist                          | <input type="checkbox"/> |
| Family Income Supplement             | <input type="checkbox"/> |
| Back to Work Allowance               | <input type="checkbox"/> |
| Jobs Initiative Scheme               | <input type="checkbox"/> |
| Single Household Payment             | <input type="checkbox"/> |
| Jobseeker's Transitional payment     | <input type="checkbox"/> |
| Community Employment Scheme          | <input type="checkbox"/> |
| Pre-retirement Allowance             | <input type="checkbox"/> |
| Invalidity Pension                   | <input type="checkbox"/> |
| Widow(er)'s Non-Contributory Pension | <input type="checkbox"/> |
| State Pension Non-Contributory       | <input type="checkbox"/> |
| State Pension Contributory           | <input type="checkbox"/> |
| Guardian's Payment Non-Contributory  | <input type="checkbox"/> |
| Supplementary Welfare Allowance      | <input type="checkbox"/> |
| Direct Provision Payment             | <input type="checkbox"/> |
| Other                                | <input type="checkbox"/> |

Specify: \_\_\_\_\_

FOR DEPENDANT LEARNERS ONLY:

Please state your relationship to a social welfare/training payment recipient/medical card holder recipient  
(tick one only):

Spouse

Daughter

Son

Duration in receipt of welfare payment (in Weeks): \_\_\_\_\_

FOR NON EEA LEARNERS ONLY:

Do you hold a GNIB stamp 4?

Yes  No

Do you have a medical card?

Yes  No

Medical Card Number (if applicable): \_\_\_\_\_

Medical Card Expiry Date (if applicable): \_\_\_\_\_

### Section 3: Educational and Training Attainments and Supports

| Education Level                            | Course Title (if applicable) | Country Achieved | Year |
|--|------------------------------|------------------|------|
| No Formal Education or Training            |                              |                  |      |
| Pre-Primary/Primary Education              |                              |                  |      |
| Junior/Inter/Group Certificate NFQ Level 3 |                              |                  |      |
| Transition Year                            |                              |                  |      |
| Leaving Certificate/A Levels/LCA           |                              |                  |      |
| Certificate NFQ Level 4                    |                              |                  |      |
| Certificate NFQ Level 5                    |                              |                  |      |
| Advanced Certificate NFQ Level 6           |                              |                  |      |
| Other non-NFQ aligned FET                  |                              |                  |      |
| Higher Certificate NFQ Level 6             |                              |                  |      |
| Diploma NFQ Level 7                        |                              |                  |      |
| Ordinary Bachelor Degree                   |                              |                  |      |
| Honours Bachelor Degree                    |                              |                  |      |
| Professional (NFQ 8+)                      |                              |                  |      |
| Post-Graduate                              |                              |                  |      |
| Doctorate or Higher                        |                              |                  |      |

Name and address of the last school attended (if known):

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Have you gained qualifications/ credits through the Recognition of Prior Learning process?

Yes  No

Have you participated in non-formal learning in the previous 4 weeks?

Yes  No

e.g. distance learning courses, private lessons, organised sessions for on-the-job training, workshops, seminars, etc.

Do you require any learning support\*? (tick one or more if applicable)

\* this is not an indication that supports will be offered

English Language

Literacy

Numeracy

ICT

Do you require any additional supports\*?

\* this is not an indication that supports will be offered

Yes  No

FOR LEARNERS REQUIRING ADDITIONAL SUPPORTS ONLY:

Please describe the learning support required:

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## Section 4: Economic Status

Indicate economic/employment status on commencement of programme:  
(tick one only)

|   |                          |
|---|--------------------------|
| Unemployed (in receipt of Jobseekers Allowance/ Benefit for whole week) | <input type="checkbox"/> |
| Employed Full-time  | <input type="checkbox"/> |
| Employed Part-time  | <input type="checkbox"/> |
| Student/Trainee   | <input type="checkbox"/> |
| Engaged in home duties  | <input type="checkbox"/> |
| Retired   | <input type="checkbox"/> |
| Inactive for other reasons  | <input type="checkbox"/> |

Date current status commenced:

FOR LEARNERS IN CURRENT EMPLOYMENT OR PREVIOUSLY EMPLOYED ONLY:

Last/current job title:

Duration last/current employment: Years: \_\_\_\_\_ Months: \_\_\_\_\_

Employment status:  
(tick one only)

|                   |                          |
|-------------------|--------------------------|
| Employee          | <input type="checkbox"/> |
| Self-employed     | <input type="checkbox"/> |
| Government scheme | <input type="checkbox"/> |
| Other             | <input type="checkbox"/> |

Employment type:  
(tick one only)

|           |                          |
|-----------|--------------------------|
| Full-time | <input type="checkbox"/> |
| Part-time | <input type="checkbox"/> |

Tenure:  
(tick one only)

|                     |                          |
|---------------------|--------------------------|
| Permanent           | <input type="checkbox"/> |
| Fixed Term Contract | <input type="checkbox"/> |
| Temporary           | <input type="checkbox"/> |
| Agency              | <input type="checkbox"/> |
| Apprenticeship      | <input type="checkbox"/> |
| No Contract         | <input type="checkbox"/> |

**Section 5: Further Details**

**Ethnic and Cultural Background:  
(tick one only)**

|                              |                          |
|------------------------------|--------------------------|
| No Consent                   | <input type="checkbox"/> |
| White                        | <input type="checkbox"/> |
| Irish                        | <input type="checkbox"/> |
| Irish Traveller              | <input type="checkbox"/> |
| Roma                         | <input type="checkbox"/> |
| Any other White Background   | <input type="checkbox"/> |
| Black or Black Irish         | <input type="checkbox"/> |
| African                      | <input type="checkbox"/> |
| Any other Black Background   | <input type="checkbox"/> |
| Asian or Asian Irish         | <input type="checkbox"/> |
| Chinese                      | <input type="checkbox"/> |
| Any other Asian Background   | <input type="checkbox"/> |
| Other, inc. Mixed Background | <input type="checkbox"/> |

Specify: \_\_\_\_\_

**Indicate the grouping that best describes you:  
(tick one or more)**

|                                      |                          |
|--------------------------------------|--------------------------|
| Substance Misuser                    | <input type="checkbox"/> |
| Ex-offender                          | <input type="checkbox"/> |
| Single Adult Household               | <input type="checkbox"/> |
| Jobless Household with Dependants    | <input type="checkbox"/> |
| Jobless Household with no Dependants | <input type="checkbox"/> |
| Homeless                             | <input type="checkbox"/> |
| None of the above                    | <input type="checkbox"/> |

**FOR NON EEA LEARNERS ONLY:**

**Residency Status:  
(tick one only)**

|  |                          |
|--|--------------------------|
| Refugee Status                                   | <input type="checkbox"/> |
| Asylum Seeker                                    | <input type="checkbox"/> |
| Student Visa                                     | <input type="checkbox"/> |
| Employment Permit                                | <input type="checkbox"/> |
| Leave to remain on humanitarian or other grounds | <input type="checkbox"/> |
| Other  | <input type="checkbox"/> |

Specify: \_\_\_\_\_

**Length of Residency:  
(tick one only)**

|                  |                          |
|------------------|--------------------------|
| Less than 1 year | <input type="checkbox"/> |
| 1 year or more   | <input type="checkbox"/> |

Years: \_\_\_\_\_

**Do you have any of the following Long Lasting Conditions\*?  
(tick one or more)**

\* this is not an indication that supports will be offered

|  |                          |
|--|--------------------------|
| Blindness or a serious vision impairment                               | <input type="checkbox"/> |
| Deafness or a serious hearing impairment                               | <input type="checkbox"/> |
| A difficulty with basic physical activities                            | <input type="checkbox"/> |
| An intellectual disability   | <input type="checkbox"/> |
| A difficulty with learning, remembering or concentrating               | <input type="checkbox"/> |
| A psychological or emotional condition                                 | <input type="checkbox"/> |
| A difficulty with pain, breathing, any other chronic illness/condition | <input type="checkbox"/> |
| None   | <input type="checkbox"/> |

e.g. walking, climbing stairs, reaching, lifting or carrying, etc. \_\_\_\_\_

# Programme and Learner Support System Data Protection Statement

In connection with your application for, and subsequent programme of study on, further education and training (FET) programme funded through SOLAS, it will be necessary to process personal data (which may be held on paper, electronically, or otherwise) about you and third parties such as your next of kin. It is important that all personal data is treated in an appropriate and lawful manner, in accordance with applicable data protection laws. The purpose of this notice is to make you aware of how such personal data will be handled in this context. You agree to make third parties whose personal data or information you disclose aware of the terms of this Data Protection Statement.

## What is PLSS?

The Programme Learner Support System (PLSS) is a joint project between SOLAS (the National Further Education and Training Authority) and Education and Training Boards Ireland (ETBI). PLSS is a suite of software applications that are designed to provide an integrated approach to the collection and processing of personal data of users of PLSS and FET programmes funded through SOLAS, and the outputs, outcomes and performance of such programmes. FET programme providers include those entities listed in Appendix 1.

Given the permanent importance of ensuring the protection of your personal data and related rights, prior to implementing PLSS, a data protection impact assessment was conducted in consultation with the data controllers below and the Office of the Data Protection Commissioner to ensure compliance with the principles of data protection.

## Who collects your data?

When you apply to attend a FET programme funded through SOLAS, personal data and information that you provide will be held by one or more of the following entities (each a "data controller" further details of which are available in Appendix 3):

· SOLAS · Your FET programme provider such as your Education Training Board (ETB) · ETBI · Higher Education Authority · Department of Education and Skills · Quality and Qualifications Ireland · Department of Employment Affairs and Social Protection · Revenue Commissioners

Each data controller is committed to ensuring that the personal data of its learners are handled in accordance with the principles set out in the Data Protection Acts 1988 and 2003 (the "DP Acts"). If you have any queries about how your data are processed please contact [kdonnellan@loetb.ie](mailto:kdonnellan@loetb.ie).

## What data will be collected?

When you apply for a FET programme funded through SOLAS, you will be asked to provide personal data and information about yourself. The personal data will include your PPSN, first name, surname, name as per your birth certificate or passport, address, date of birth, gender, nationality, whether you are in receipt of a Department of Employment Affairs and Social Protection (DEASP) payments and/or employment details for those of you that are in employment and/or attended higher education, whether you have previously attended a FET programme funded through SOLAS. PLSS will record the course you enrolled in and your award (if any).

Each of the data controllers will process personal data and information that you provide and, in some instances where relevant, information provided to them by third parties such as other Governmental/public sector bodies (see more about this below).

Sensitive information about you such as ethnic or cultural background, living circumstances may be requested by a data controller listed below, which you may freely decide to give or not – this is an entirely optional disclosure. If you provide this information, the data will be retained, in aggregate form, for statistical and research purposes and to compare the progress of such groups with other groups. Such statistics and research will assist in identifying gaps in the system and assisting in the development and implementation of appropriate policies (e.g. equal opportunity policies) and interventions for future learners. If you decide to provide this information you are giving your explicit permission for the data to be processed for these purposes. Further details of the data to be processed are listed in Appendix 2.

## Why and how do we process the information you provide?

It is necessary to process personal data you provide in connection with your application to and attendance on a FET programme funded through SOLAS. By submitting your application you acknowledge that such personal data may be processed for those purposes, including:

1. To contact you about the application.
2. To administer the application and to assess your eligibility for a FET programme funded through SOLAS in a particular academic year.
3. To follow up with you after the application is received, as required.
4. Maintenance of your learner record (including personal and course details).
5. Management of course processes (including commencement, completion, progressions).
6. Providing advice and support through the FET provider Guidance Services, where available.
7. To contact you after the course completion in order to measure course impact in relation to your further education and training participation and/or employment.
8. To track, evaluate and assess the outcomes of the FET programme.
9. To comply with European Union monitoring and reporting requirements.

Each of the data controllers undertakes to maintain your personal data in secure conditions with appropriate technical and organisational measures to protect it from unauthorised access or use. The data held on your PLSS record will be disclosed to relevant staff of the relevant data controllers and the FET programme provider and SOLAS on a need-to-know basis. All staff are made aware of the procedures they must follow to ensure your data is appropriately protected. It may also be made available to affiliated entities, agents, service providers, advisers and data processors and other Governmental, regulatory and/or public sector bodies.

SOLAS is required under the Further Education and Training Act 2013 to (among other things) to assist in the co-ordination and provision of training by others and conduct research into the functions of SOLAS. This might include tracking involvement in, conducting impact evaluations on and assessing outcomes of FET programmes funded through SOLAS. Accordingly, pursuant to agreed protocols and arrangements, SOLAS may provide to and receive from other Governmental, regulatory and/or public bodies (including those listed in Appendix 3), limited and specific types of data about you or provided by you in your application for a FET programme. For example FET providers are required to disclose some of your personal data to SOLAS for statistical purposes. In addition, if you are attending an European Union co-funded programme the Department of Education and Skills is required to provide some of your personal data to allow monitoring, reporting and evaluating programmes to which they provide funds.

To support efficient processing of the application, a FET programme provider may need to check the accuracy of personal information you provide with external data sources. For example, if you have achieved certifications previously from another institution, the FET programme provider may need to contact the other institution(s) for confirmation of any qualifications obtained. The current list of such institutions/agencies is set out in Appendix 3.

## Retention of Data

Each data controller will keep your personal data for the purposes of on-going administration, audit, and review, but only for as long as is necessary to meet the purposes set out in this notice. Each data controller will keep historical data that is no longer required for these purposes for a set time before disposal according to its data retention policy.

## Your Rights

You may request, in writing, a copy of your information held by each of the data controllers. Please write to the Data Protection Compliance Officer at the relevant data controller [kdonnellan@loetb.ie](mailto:kdonnellan@loetb.ie) together with payment of the applicable fee (currently €6.35). You may be asked to prove your identity before your request is met. If you believe there may be inaccuracies identified in the information held about you, then you can contact [kdonnellan@loetb.ie](mailto:kdonnellan@loetb.ie) to have such corrected, to block certain uses or object to the processing of your personal data.

## Your Queries

If you have any queries about this notice or how your data are processed please contact [kdonnellan@loetb.ie](mailto:kdonnellan@loetb.ie).

## Acknowledgement

I understand that my data will be processed for the purposes and in the manner set out in this notice and will make third parties whose personal data or information I disclose aware of the terms of this Data Protection Statement.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**Please complete this form and return to your ETB**

## Appendix 1

### Education and Training Boards

City of Dublin Education and Training Board  
Donegal Education and Training Board  
Kerry Education and Training Board  
Cork Education and Training Board  
Galway and Roscommon Education and Training Board  
Limerick and Clare Education and Training Board  
Cavan and Monaghan Education and Training Board  
Dublin and Dun Laoghaire Education and Training Board  
Kildare and Wicklow Education and Training Board  
Kilkenny and Carlow Education and Training Board  
Laois and Offaly Education and Training Board  
Longford and Westmeath Education and Training Board  
Louth and Meath Education and Training Board  
Mayo, Sligo and Leitrim Education and Training Board  
Tipperary Education and Training Board  
Waterford and Wexford Education and Training Board

### Other Providers

National Adult Literacy Association  
Irish Deaf Society

### Community, Voluntary and Secondary Schools

St Louis Community School, Kiltimagh, Co. Mayo  
Coláiste Chiaráin, Summerhill, Athlone, Co. Roscommon  
Our Lady's College, Presentation Road, Galway City

Mary Immaculate Secondary School, Lisdoonvarna, Co. Clare  
Scoil Mhuire, Ennistymon, Co. Clare  
North Presentation Secondary School, Farranree, Cork  
Sacred Heart Secondary School, Clonakilty, Co. Cork  
Nagle Rice Secondary School, Doneraile, Co. Cork  
Central College, Sexton Street, Limerick  
Sancta Maria College, Louisburgh, Co. Mayo  
Nagle Centre Presentation Secondary School, Cannon Street, Waterford  
Donahies Community School, Streamville Road, Dublin 13  
Scoil Bernadette, Montenotte, Cork  
St Michaels, Castlereagh, Co. Roscommon.  
Coláiste Mhuire, Ballygar, Co. Galway  
St Cuan's College, Castleblakeney, Ballinasloe, Co. Galway  
Mean Scoil Mhuire, Newtownsmith, Galway  
St. Joseph's College, Summerhill, Athlone, Co. Westmeath  
Our Lady's Secondary School, Belmullet, Co. Mayo  
Jesus & Mary Secondary School, Enniscrone, Co. Sligo  
Mercy College, Sligo  
St. Patrick's Comprehensive School, Shannon, Co. Clare  
Community School, Cabinteely, Dublin 18  
St. Aidan's Community School, Brookfield, Tallaght, Dublin 24  
St. Tiernan's Community School, Parkvale, Sandyford, Dublin 16  
Community School, Tullow, Co. Carlow  
Community School, Castlecomer, Co. Kilkenny  
Scoil Phobail Mhic Dara, Carna, Co. Galway  
Clifden Community School, Clifden, Co. Galway  
Community School, Dunmore, Co. Galway  
Ramsgrange Community School, New Ross, Co. Wexford  
Community School, Kilrush, Co. Clare  
Community School Ballyhaunis, Co. Mayo  
Gorey Community School, Gorey, Co. Wexford

## Appendix 2

### Data Items

PPSN  
First Name  
Last Name  
Gender  
Date of Birth  
Address  
County  
eMail  
Mobile  
Phone  
Nationality  
Country of Birth  
Follow Up Consent  
Length of Residency In Ireland  
Highest Formal Education (Award)  
Highest Formal Education (Level)  
Highest Formal Level field (ISCED)  
Highest Formal Level Institution Type  
Highest Formal Level Country  
Highest Formal Level Duration  
Highest Formal Level Year  
Level of English Proficiency  
Non Formal (0-N) Type, Level, Field, Institution, Delivery Mode, Delivery Method, Duration  
Literacy Level  
Numeracy Level  
ICT Literacy  
Funding  
Referral/EOI Source  
Formal Education History (0-N) Award, Level, Field, Institution, Country, Duration  
Non Formal Education History (0-N) Type, Level, Field, Institution, Duration  
RPL  
Driver's License  
Irish Speaker  
Other Languages  
Economic Status-current  
Economic status - current: start date  
If employed, current employment: type  
If employed, current employment: tenure  
If employed, current employment: occupation  
If employed, current employment: sector  
If employed, current employment: duration with current employer  
If unemployed, previous employment  
If unemployed, previous employment: type  
If unemployed, previous employment: tenure  
If unemployed, previous employment: occupation  
If unemployed, previous employment: sector  
If unemployed, previous employment: duration with last employer  
Total work experience: length of time in paid employment (including current employer, if employed)

If unemployed: DEASP PEX score (probability of exit)  
Employment history (0-N): type, tenure, occupation, sector, duration  
On Live Register  
In receipt of jobseekers benefit  
In receipt of jobseekers benefit: duration  
In receipt of job seeker allowance  
In receipt of job seeker allowance: duration  
In receipt of credits (Live Register)  
In receipt of credits: duration  
In receipt of back to work allowance  
In receipt of back to work allowance: duration  
In receipt of back to education allowance  
In receipt of back to education allowance: duration  
In receipt of training allowance  
In receipt of training allowance: duration  
In receipt of one-parent family payment  
In receipt of one-parent family payment: duration  
In receipt of farm assistance  
In receipt of farm assistance: duration  
In receipt of rural social scheme  
In receipt of rural social scheme: duration  
In receipt of back to work enterprise allowance  
In receipt of back to work enterprise allowance: duration  
In receipt of family income supplement  
In receipt of family income supplement: duration  
In receipt of continued child payment  
In receipt of continued child payment: duration  
In receipt of any other welfare payment  
In receipt of any other welfare payment: type  
In receipt of any other welfare payment: duration  
Welfare payment history (0-N): type, duration  
Homeless  
Disability  
Parenting/caring duties  
In receipt of a disability welfare payment  
In receipt of a disability welfare payment: duration  
In need of learner supports  
Type of learner support required  
Refugee  
Asylum seeker  
Member of a Minority Group  
Eligibility Outcome  
Suitability Outcome  
Start Date  
Finish Reason  
Progression/Placement  
Medical Card Number  
Medical Card Expiry Date  
Parental Consent

## Appendix 3

·Department of Education and Skills ·Revenue Commissioners: Confirmation of employment or self-employment and parameters of income details (where available)  
·Department of Employment affairs and Social Protection: To validate information on applicants in receipt of social welfare payments ·Quality and Qualifications Ireland: To verify information regarding applicant's certification outputs as a result of attending a FET Programme ·Higher Education Authority (HEA): To verify and validate applicants who progress to higher education.  
·Education and Training Boards: To verify and validate details of applicants who progress to further education.

This form should not be altered in any way. Should the form be altered, for whatever reason, the PLSS System can assume no responsibility for and give no guarantees, undertakings or warranties concerning the accuracy, completeness or up to date nature of the information provided and does not accept any liability whatsoever arising from any errors or omissions.

**School/Centre:** \_\_\_\_\_

**Funding Category:**

|                      |                                  |                          |                               |                          |
|----------------------|----------------------------------|--------------------------|-------------------------------|--------------------------|
| <i>(please tick)</i> | Adult Literacy Groups            | <input type="checkbox"/> | Local Training Initiatives    | <input type="checkbox"/> |
|                      | Apprenticeship Training          | <input type="checkbox"/> | Other Funding                 | <input type="checkbox"/> |
|                      | Blended Training                 | <input type="checkbox"/> | PLC                           | <input type="checkbox"/> |
|                      | Bridging and Foundation Training | <input type="checkbox"/> | Refugee Resettlement          | <input type="checkbox"/> |
|                      | BTEI Groups                      | <input type="checkbox"/> | Skills for Work               | <input type="checkbox"/> |
|                      | Community Education              | <input type="checkbox"/> | Specialist Training Providers | <input type="checkbox"/> |
|                      | Community Training Centres       | <input type="checkbox"/> | Specific Skills Training      | <input type="checkbox"/> |
|                      | ESOL                             | <input type="checkbox"/> | Traineeship Training          | <input type="checkbox"/> |
|                      | Evening Training                 | <input type="checkbox"/> | Voluntary Literacy Tuition    | <input type="checkbox"/> |
|                      | FET Cooperation Hours            | <input type="checkbox"/> | VTOS Core                     | <input type="checkbox"/> |
|                      | ITABE                            | <input type="checkbox"/> | VTOS Dispersed                | <input type="checkbox"/> |
|                      | Justice Workshop                 | <input type="checkbox"/> | Youthreach                    | <input type="checkbox"/> |
|                      | Libraries Training               | <input type="checkbox"/> | Traineeship Employed          | <input type="checkbox"/> |

**Eligibility:**

|                      |   |                          |
|----------------------|---|--------------------------|
| <i>(please tick)</i> | VTOS - Over 21                            | <input type="checkbox"/> |
|                      | Youthreach - Early School Leaver          | <input type="checkbox"/> |
|                      | BTEI - Medical Card                       | <input type="checkbox"/> |
|                      | BTEI/VTOS - 6 month receipt of SW payment | <input type="checkbox"/> |
|                      | BTEI/VTOS - SW Payment                    | <input type="checkbox"/> |
|                      | BTEI/VTOS - Dependent of SW Recipient     | <input type="checkbox"/> |
|                      | BTEI/VTOS - Credits                       | <input type="checkbox"/> |
|                      | Youth Guarantee                           | <input type="checkbox"/> |
|                      | Parenting/Care Duties                     | <input type="checkbox"/> |