





Application Form

Fast track your application: info@hgta.org • info@wgta.org.uk or call: Hereford - 01432 274310 • Worcester - 01905 729993 • www.hwgta.org

On receipt at Herefordshire and Worcestershire Group Training Association this form will be separated from the application form and used for statistical monitoring only. If you prefer you may send the form separately to: Herefordshire Group Training Association Holmer Road, Hereford, Herefordshire, HR4 9SX or Worcestershire Group Training Association, McKenzie Way, Worcester, Worcestershire, WR4 9GN.

EQUALITY AND DIVERSITY

Candidates will not be discriminated against on grounds of gender, disability, race, age, sexual orientation, maternity/pregnancy, religious belief, gender reassignment, marriage or civil partnerships. The information that you provide on this form will help us monitor equality and diversity policies and make sure it is working in practice. It will be treated in strictest confidence and forms no part of the selection process. To help us keep track of the success of applicants, we would prefer you to provide your name, but you may wish to remain anonymous.

First name(s):	Surname:	
Apprenticeship applied for:	Date of Birth:	
GENDER: Which do you consider yourself	to ba?	
Male	Female	Rather not say
	be disabled or have any health problems? (please ti	-
Visual impairment	Other physical disability	Emotional/behavioural difficulties
Hearing impairment	Other medical condition	Mental health difficulties
Disability affecting mobility	(eg.epilepsy, asthma, diabetes)	Temporary disability after illness
Profound complex disabilities	Asperger's Syndrome	(eg.post-viral or accident)
Multiple disabilities	Other	
	onsider yourself to have any health issues or learning (now or in the future? (Please tick any that apply).	difficulties which may impact on your
Moderate learning difficulty	Severe learning difficulty	Dyslexia
Dyscalculia	Other specific learning difficulty	Autism spectrum disorder
Multiple learning difficulties		
WHAT IS YOUR ETHNIC GROUP? Choose of	one option that best describes your ethnic group or	background.
WHITE	BLACK/AFRICAN/CARIBBEAN/BLACK BRITISH	MIXED/MULITPLE ETHNIC GROUPS
English/Welsh/Scottish	African	White and Black Caribbean
Northern Irish/British	Caribbean	White and Black African
🗌 Irish	Any other Black/African/Caribbean	☐ White and Asian
Traveller or Irish Traveller	background	Any other Mixed/Multiple ethnic
Any other White background		background
ASIAN/ASIAN BRITISH	OTHER ETHNIC GROUP	
🗌 Indian	Arab	
🗌 Pakistani	Any other ethnic group	
🗌 Bangladeshi		
Chinese		
Any other Asian background		



APPLICATION FORM

Apprenticeships / Advanced Apprenticeships

Please complete all sections fully in order for us to process your application. Pages 1-4 of this application form will be forwarded to employers as part of the recruitment process. So please take this opportunity to promote yourself.

Information provided on this application form is stored and processed in accordance with the provisions of Data Protection Act 1998. Completion of the form signifies the applicant's or applicant's parent/guardian's consent to personal data, including medical and ethnicity data and photograph being used in connection with the application.

Apprenticeship funding is subject to meeting some eligibility requirements. Please see the Apprenticeships website for details **www.gov.uk/apprenticeships-guide**. *Please speak to a member of our staff for details if required*.

First name:
Surname:
Home Address:
Postcode:
Telephone No:
Mobile No:
Email address:
Programme sought:
Which programme are you applying for / interested in?
Accountancy Business and Administration Customer Service Engineering Management Other

EDUCATION AND QUALIFICATIONS	Please list all schools you have	attended after year 7 (inclu	iding Sixth Form or Colle	ege of Technology) and a	any employment
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SCHOOLS (from year 7):		
DATES:		
From	То	NAME(S) OF SCHOOL
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SIXTH FORM / COLLEGES		
DATES:		
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From	То	NAME(S) OF COLLEGE
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QUALIFICATIONS: Please list qualifications gained (or expected) from scho	ol, college or work.		
Subject:	Date Taken:	Grade Expected:	Grade Achieved:

EMPLOYME	NT			
DATES:				
From	То	NAME(S) OF EMPLOYER		JOB TITLE
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REVIOUS EXPE	RIENCE: Details	of previous experience including work and volunt	ary work experience:	
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FAVOURITE SUBJECTS: What were your favourite subjects at school? This can often give an indication of the type of career that will suit you.

HOBBIES AND INTERESTS: What do you enjoy doing in your spare time?

ADDITIONAL INFORMATION TO SUPPORT YOUR APPLICATION: (i.e. type of roles interested in, reasons for applying to HWGTA, skills, personal qualities etc.)

APPRENTICE ELIGIBILITY: As Apprenticeships are government funded, HWGTA nee	d the following information to ensure apprenticeship eligibility:
First name(s):	Surname:
National Insurance No:	Date of Birth: Age:

IATIONALITY	
Have you been resident in the UK and/or the EEA (E	European Economic Area) for the last 3 years Yes \square No \square
n which Country do you normally live?	
What is your nationality?	
f you are, or have been living overseas please state Please indicate your current status in the UK:	your date of entry into the UK?
British/EU Citizen	□ Leave to enter as a student □ Exceptional leave to remain

cebook	HWGTA Open Day National Apprenticeship Service
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hool or College	Service
ewspaper Advert	Employer
areers Convention	Other (please specify below)
oplied previously/ex-trainee	



HWGTA is committed to maintaining the privacy of data of apprentice applicants.

For recruitment purposes pages 1-4 of this application form will be sent to employers, along with any subsequent interview notes documented by HWGTA staff, initial assessment results and paperwork. If your application is successful and you join the apprenticeship programme, these details will be held for 25 years from your apprenticeship start date to meet government funding criteria guidelines. If your application is unsuccessful, applicant packs are held for 18 months (engineering programme) and 12 months (all other programmes) and then disposed of securely. HWGTA instructs prospective apprentice employers who have access to applicant details that information can only be used for recruitment purposes, cannot be shared with any third party and must be disposed of securely within 5 working days where an applicant is unsuccessful.

Please include any other documents to support your application. (i.e. work experience/employers report, CV)
I confirm that the given information is correct and I understand how HWGTA will process and store my information

Signed:	Applicant	Date:	/	/
Signed:	Parent/Guardian (Optional if over 18)	Date:	/	/



Herefordshire Group Training Association

FREEPOST Address:

FREEPOST SWC0236 Herefordshire Group Training Association Holmer Road, Hereford, HR4 9SX

Tel: 01432 274310 Email: info@hwgta.org www.hwgta.org

Worcestershire Group Training Association

FREEPOST Address:

FREEPOST Plus RTYB–ZBSK–TCSK Worcester Group Training Association Great Western Business Park, McKenzie Way, Worcester, WR4 9GN

Tel: 01905 729993 Email: info@hwgta.org www.hwgta.org