

# Apprenticeship Application Form

Please email your completed application form back to [Apprentice.Applications@seta.co.uk](mailto:Apprentice.Applications@seta.co.uk)



First Name	Middle Name	Last name	Seta Reference

Address:		Date of Birth :				
		Gender:				
		Age:				
Postcode:		NI Number :				
Telephone		Full Driving Licence :	Yes		No	
Mobile		Provisional Driving Licence:	Yes		No	
e-mail address		Car Owner	Yes		No	

## Education

School / College	From	To

## Qualifications

Subject	Qualification <small>e.g. GCSE, NVQ, BTEC, Functional Skills</small>	Predicted Grade	Achieved Grade	Date Achieved

**Prior Learning** *e.g. Engineering Level 2, Fork Lift Truck. Please quote the full qualification title.*

From		To	
Qualification		Level	
Topics Covered			
From		To	
Qualification		Level	
Topics Covered			

**Work Experience / Volunteering** *Please describe in detail.*

Employer / Duties	Date From	Date To
<i>Name</i>		
<i>Duties</i>		
<i>Name</i>		
<i>Duties</i>		
<i>Name</i>		
<i>Duties</i>		

**Career Objectives** *Why do you want to be an apprentice and why this sector?*

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**Personal Statement** *Please provide a statement about yourself, including your qualities, experience, hobbies and interests. List any awards or achievements you have attained. Use this section to describe hands on activities you have undertaken - such as DIY projects; practical lessons at school; bicycle/car maintenance etc. Give examples of skills learnt through all these activities.*

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## Apprenticeship Preference

(Please indicate all apprenticeship roles you would consider – research them for more details on the particular job role)

Apprenticeship Main Type	Sub Category	Yes/No
Advanced Engineering Apprenticeship L3	Electrical Fitting	
Advanced Engineering Apprenticeship L3	Electrical Maintenance	
Advanced Engineering Apprenticeship L3	Electrical and Mechanical Maintenance	
Advanced Engineering Apprenticeship L3	Engineering Design/Quality Assurance - Office based	
Advanced Engineering Apprenticeship L3	Machining/CNC/Toolmaking/Die Maintenance	
Advanced Engineering Apprenticeship L3	Mechanical Fitting	
Advanced Engineering Apprenticeship L3	Mechanical Maintenance	
Advanced Engineering Apprenticeship L3	Safety, Health and Environment	
Advanced Engineering Apprenticeship L3	Technical Support - Office based	
Advanced Engineering Apprenticeship L3	Welding/Fabrication	
Higher Apprenticeship L4	Improvement Practitioner	
Higher Engineering Apprenticeship L4	Manufacturing/Maintenance - Candidates must have A' Level Engineering or an Engineering Level 3 Qualifications	
Higher Engineering Apprenticeship L4	Process Lead - Candidates must have A' Level Engineering or an Engineering Level 3 Qualifications	

Are you applying for an apprenticeship with a specific employer? If so, which company are you applying to?				
Specific Vacancy Reference Number (if applicable)				
Are you happy for Seta to forward your details to other employers?	Yes		No	
When are you available to start an apprenticeship - Immediately or June – September?				
Please provide a school/college/employer contact name and email address for someone that is able to give you a current reference.				

### Aptitude Test Scores - Engineering

Test Date:

Mechanical Reasoning	%	Principles of Measurement	%
Electrical Principles	%	Spatial Relationships	%
Information Technology	%	Literacy	%
Numeracy	%	Overall Score	%

### Aptitude Test Scores - Non-Engineering

Test Date:

Numeracy	%	Information Technology	%
Literacy	%	Numeracy Problem Solving	%
Overall Score	%	GCSE Maths score and grade (additional test)	% Grade

Seta Limited is committed to protecting your right to privacy. The information you provide will be kept on a Seta database and will be used for recruitment purposes. All information supplied will be held in the strictest confidence.

**Where did you hear about us** (Tick all that apply)?

School Assembly		Seta Open Event		Connexions	
School Careers Event		Facebook/Twitter/LinkedIn		Relative/Friend	
Staff at School/College		National Apprenticeship Website		Work Experience	

**Eligibility (please tick where appropriate)**

- ☐ I am normally and lawfully, a resident in the UK and have been for at least the last 3 years
- ☐ I do not hold a qualification at Level 4 or above
- ☐ I am not currently on any other government funded training

If you are not in education, employment, or training please tell us why

Seta Limited operates an Equal Opportunity Policy with regard to applications for apprenticeships and will consider all applications on their merits, irrespective of their age, disability, gender, race, religion/beliefs of sexual orientation. We are required to collect the following information for government statistical purposes.

**Equality and Diversity**

Gender ☐ Male ☐ Female ☐ Other ☐ Prefer not to say

**Sexual Orientation**

- ☐ Heterosexual or Straight ☐ Bisexual
- ☐ Lesbian or Gay ☐ Prefer not to say

**Ethnicity**

We are required to collect the following information for government statistical purposes.

- |   |  |
|---|--|
| <input type="checkbox"/> 31 English/Welsh/Scottish/Northern Irish/British | <input type="checkbox"/> 41 Bangladeshi                                  |
| <input type="checkbox"/> 32 Irish   | <input type="checkbox"/> 42 Chinese                                      |
| <input type="checkbox"/> 33 Gypsy or Irish Traveller                      | <input type="checkbox"/> 43 Any Other Asian Background                   |
| <input type="checkbox"/> 34 Any Other White Background                    | <input type="checkbox"/> 44 African                                      |
| <input type="checkbox"/> 35 White and Black Caribbean                     | <input type="checkbox"/> 45 Caribbean                                    |
| <input type="checkbox"/> 36 White and Black African                       | <input type="checkbox"/> 46 Any other Black/African/Caribbean Background |
| <input type="checkbox"/> 37 White and Asian                               | <input type="checkbox"/> 47 Arab   |
| <input type="checkbox"/> 38 Any Other Mixed/Multiple Ethnic               | <input type="checkbox"/> 98 Background Any Other Ethnic group            |
| <input type="checkbox"/> 39 Indian  | <input type="checkbox"/> 99 Prefer not to say                            |
| <input type="checkbox"/> 40 Pakistani                                     |  |

**Religion or Belief**☐ Christian☐ Hindu☐ Muslim☐ Jewish☐ Buddhist☐ Sikh☐ None☐ Prefer not to say

Other, please specify

**Rehabilitation of Offenders Act 1974**

Information disclosed will not necessarily prevent you from studying this course of your choice. However, if you have previous unspent convictions that you do not disclose and this is discovered you may be refused a place or asked to leave the course.

Have you ever been convicted of a criminal offence, or been made subject of an Order, civil or criminal, made by a Court of Law, involving offences against the person, property, children, or the handling of money?

Yes ☐ No ☐

**Disability Discrimination Act 2005**

The DDA 2005 defines a disability as "A physical or mental impairment that has a substantial and long term effect on a person's ability to carry out normal day-to-day activities". Would you class yourself as having a disability as defined under the Act?

☐ 01 Visual impairment (including Colour blindness)☐ 02 Hearing impairment☐ 03 Disability affecting mobility☐ 04 Other physical disability☐ 05 Other medical condition (eg. Asthma diabetes epilepsy)☐ 07 Mental ill health☐ 08 Temporary disability after illness (eg. accident)☐ 97 Other☐ 98 No Disability☐ 99 Not known/information not provided**Learning Requirements**

If you select parts 0,11,11a - Evidence will be required in the form of a medical certificate/statement.

☐ 0 Dyslexia (Impaired ability to read)☐ 11 Dyscalculia (number dyslexia)☐ 11a Dyspraxia (lack of co-ordination)☐ 98 No learning difficulty☐ 99 Not known/information not provided

## Support Needs

Do you need support with Maths, English or ESOL? Yes ☐ No ☐

Do you have a learning difficulty/ disability/ health problem/ any illness that affects your learning Yes ☐ No ☐

Do you have a Local Authority Education Health & Care Plan / EHCP? Yes ☐ No ☐

Are you entitled to special exam arrangements e.g. separate room / reader? Yes ☐ No ☐

If yes to any of the above, please give details including date of EHCP or most recent annual review.

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**If under 18 years of age, please ensure that Parent/Guardian details are completed.**

Parent / Guardian Name	
Parent / Guardian Postcode	
Parent / Guardian Telephone Number	
Parent / Guardian Email address	

**Applicant Declaration - please ensure that the box below is ticked otherwise we can not progress your application.**

☐ By ticking this box I certify that the information which I have given is correct to the best of my knowledge. I understand that it will be processed by computer and used in accordance with the registrations made by Seta Limited under the terms of GDPR. I agree that the information on this form may be passed to prospective employers and other organisations directly associated with funding education support and guidance.

Please email your completed application form back to [Apprentice.Applications@seta.co.uk](mailto:Apprentice.Applications@seta.co.uk)

If you have any queries regarding your application, please email [Apprentice.Applications@seta.co.uk](mailto:Apprentice.Applications@seta.co.uk) or call us on 0191 4162860. Parents/carers as much as we are happy to talk to you we would prefer to speak to your young person directly if possible.