

**Self-Declaration Form for Additional Learning Support 2020/21**

You have indicated that you would like additional support with your studies.

Please complete this form and email it back to als@esc.ac.uk

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| **1. Your details and what you are studying** |
| Name | Click or tap here to enter text. | Telephone Number  | Click or tap here to enter text. |
| Date of Birth | Click or tap to enter a date. | Email Address  | Click or tap here to enter text. |
| What course are you on / have applied for? | Click or tap here to enter text. |
| **2. Are you Studying English or Maths?** |
| English GCSE (Click the box to select) [ ]  | Maths GCSE (Click the box to select) [ ]  |
| English Functional Skills (Click the box to select) [ ] What Level? Choose an item. | Maths Functional Skills (Click the box to select) [ ] What Level? Choose an item. |
| **3. What Support did you have previously in class?** |
| Teaching Assistant sitting with you in class? | (Click the box to select)[ ]  |
| Teaching Assistant in class to help you and others? | (Click the box to select)[ ]  |
| Or tell us about other support in class? Click or tap here to enter text. |
| **4. Did you have Support out of class?** |
| If YES, tell us what support you had? Click or tap here to enter text. |
| **5. If you had Exam Concessions, click the box to tell us which:**  |
| Extra Time [ ]  | A Prompt [ ]  | Computer / Laptop [ ]  | Reading Pen [ ]  |
| A Reader [ ]  | A Scribe [ ]  | Smaller Room [ ]  | Rest Breaks [ ]  |
| Coloured Overlay [ ] What Colour? Click or tap here to enter text. | Modified Paper [ ] What Colour? Click or tap here to enter text. |
| **5. Tick this box if you have an Education Health & Care Plan (EHCP)?** [ ] *If so, please send a copy to* *EHCP@esc.ac.uk* |
| **6. Do you consider yourself to have any of the following?** |
| Dyslexia[ ]  | ASD / Asperger’s[ ]  | Speech & Language Needs[ ]  | Hearing / Vision Impairment[ ]  |
| ADHD[ ]  | Difficulty with maths[ ]  | Physical Disability[ ]  | Additional Pastoral Needs[ ]  |
| Do you have medical needs? Please tell us about them: Click or tap here to enter text. |
| **7. Tell us what school you went to:** Click or tap here to enter text. |
| **8. To support you at College, is there anything else you would like to tell us?**Click or tap here to enter text. |