Section 12 – Additional Learning Aim & Funding Details

A04. Data Set Identifier Code
A06. ESF Co-financing data sets

A09. Learning Aim Reference
A10. LSC Funding Stream
(Use code 45 for core Train to Gain and SME flexibilities)

A15. Programme Type
A53. Additional Learning Needs

A27. Learning Start Date
A28. Planned End Date

A23. Delivery Location Postcode

A51a. Proportion of Funding
A14. Reason for Full/Co-Funding

A59. Planned Credit Value
A46. National Learning
(QCF learning aims only)

A24. SOC Code
A49. Special Projects
and Pilots

A44. Employer Identifier

A45. Workplace Location Postcode

A54. Broker Contract No
A18. Main Delivery Method
(Enter code 22 for Higher Rate,
code 23 Lower Rate/SfL/Units/Thin quals)

Additional Fields for ESF Co-Financing:
The fields listed below are those required for European Social Fund co-financing purposes.

Note: Fields E08 ‘Date started ESF Co-financing’ and E09 ‘Planned End for ESF Co-financing’ are the same dates as for A27 and A28. Field E10 ‘Date ended ESF Co-Financing’ is the same date as A31.

E22. Project Dossier No (Enter Code from Table below)
E23. Local Project No (Enter code from Table below)

<table>
<thead>
<tr>
<th>Project Dossier No</th>
<th>Local Project Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Midlands 08016LWM2</td>
<td>West Midlands 999</td>
</tr>
<tr>
<td>All Other Regions Leave Blank</td>
<td>All Other Regions 000</td>
</tr>
</tbody>
</table>

E18. Delivery Mode

E19. Support measures to be accessed by the learner

E20. Learner Background

E21. Support measures for learners with disabilities

E15. Type and size of Learner’s Employer

E16. Addressing gender stereotyping
Section 13 – Special Monitoring Data

A47. Local LSC Learning Aim Monitoring

A48. Provider Specified Learning Aim Data

Section 14 – Additional Aim Declaration

Provider
‘I confirm that the information on this form is correct and I declare that I have supported the learner in the completion of this document and to the best of my knowledge, the above named learner is eligible to enter Train to Gain. I have seen evidence to support the residency criteria (where applicable)’.

Provider Signature
Date

Section 15 – Additional Aim Achiever/Early Leaver Information

L39. Destination

A31. Learning Actual end date

A40. Achievement date

A34. Completion status

A35. Learning outcome

A36. Learning outcome grade

A37. No of units completed from a full learning aim*

A38. Total no of units required to achieve full learning aim*

* Fields A37 & A38 should be left blank when the full aim has been achieved

A50. Reason Learning Ended

A60. Credits Achieved

(ACF learning aims only)

Provider Name
Date

Provider Signature

Achiever – I can confirm and certify that the Achievement details on this form are correct. All required evidence has been submitted with the claim and copies of such documents are held for audit purposes. Evidence to confirm learning is also held for audit purposes.

Early Leaver - I can confirm that this learner has withdrawn from the Train to Gain programme and that a formal withdrawal letter has been issued to the learner.