**Learning Support – Eligibility Form**

Most recent update: 10 September 2025

This form provides the auditable evidence that a learner requires additional support on the basis of having a disability and/or learning difficulty, over and above general course support. This additional support is in order to meet a learner’s needs by making reasonable adjustments in line with the Equality Act 2010.

***Tutor to complete and submit to Local Authority***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Partner provider |  | Assessment undertaken by |  | |
| Assessor telephone |  | Assessor email address |  | |
| Date of assessment |  | Project code |  | |
| Learner name |  | Learner date of birth |  | |
| Course title |  | Course dates | Start | End |
|  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Learning Support funding can be claimed for learners that have a learning difficulty or disability, to pay for the cost of reasonable adjustments to the classroom or learning programme. Examples of reasonable adjustments could include extra help in the classroom or additional resources in the classroom such as specific software/screen eg to support visual impairment. | | | |
| Learning support needs identified at Initial Assessment were as follows: | | | |
|  | | | |
| Please identify the category that best matches the learner’s disability of learning difficulty  *please tick all that apply* | | | |
| Visual impairment |  | Hearing impairment |  |
| Disability affecting mobility |  | Profound complex disabilities |  |
| Severe learning difficulty |  | Moderate learning difficulty |  |
| Autism spectrum disorder |  | Asperger’s syndrome |  |
| Mental health difficulty |  | Social and emotional difficulties |  |
| Dyslexia |  | Dyscalculia |  |
| Speech, language and communication needs |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Other conditions *Please provide details below* | | | |
| Other physical disability |  | Other specific learning disability |  |
| Other disability |  | Other learning difficulty |  |
| Other medical condition |  | Temporary disability after illness or accident |  |
|  | | | |

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| --- | --- | --- | --- |
| What reasonable adjustment do you need to make? – tick as many as apply | | | |
| The learner would benefit from: | | | |
| Extra tutor support |  | Learning assistant/mentor support |  |
| Adaptive resources/technology |  | Deafness support e.g. signer |  |
| Other *please provide details below* |  |  | |
|  | | | |

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| --- | --- | --- | --- |
| I confirm that the learner named above has been assessed for learning support needs that are over and above ‘everyday difficulties not associated with the learner’s learning on their programme’. This is learning support that is over and above that provided in a standard learning programme which leads to their primary learning goal. I will immediately inform the Local Authority Skills and Employment Service if this support is no longer required at any point during the duration of this course. | | | |
| Tutor signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Please include a detailed breakdown of funding required to support the learner named above NB You will be required to provide evidence of spend when invoicing the council | | | |
|  | | | |
| **Total cost** | **£** | | |
| Contract manager signature |  | Date |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| CW&C Skills and Employment – admin use only | | | | | | | |
| Amount claimed via ILR/claim system | |  | Date from: |  | | Date to: |  |
| Signature of LA approver |  | | | | | | |
| Name |  | | | Role |  | | |