LEARNING CONTRACT

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Personal Details | | | | | | | | |
| Title: | Forename: | | | | | Surname: | | |
| Previous Surname: | | | Home Address: | | | | | |
|  | | | | | | | | |
|  | | | | | Postcode: | | | |
| Email: | | | | | Tel (Work): | | | |
| Date of Birth: | | | | | | | Male:  Female: | |
| Employer’s Name: | | | | | | | | |
| Employer’s Address: | | | | | | | | |
|  | | | | | | | | |
| Support Needs: Yes  No | | | | | | | |  |
| Sight | | Mobility | | Language | | | | Other |
| Hearing | | Learning | | Prefer not to say | | | |  |
| Details: | | | | | | | | |
| Candidate Statement | | | | | | | | |
| I have been given information about the training programme and understand how I will be involved. I agree to complete all planned work on time as agreed with my assessor during assessment planning. I agree to put my best effort into the programme.  Confidential And Personal Details: I understand that the information provided above will be stored in manual and electronic files and is subject to the provisions of the General Data Protection Regulation (2018). I agree to information provided being used by Food Standards Scotland in accordance with the legislation and published [FSS privacy notice](https://www.foodstandards.gov.scot/privacy/privacy-notices/assessment-centre-candidates-privacy-notice). | | | | | | | | |
| **Signed: Date:** | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Programme Details | | | | | | | | | | | | |
| **FSS Programme:** | Animal Welfare - WATOK | |  | | |  | | | | | | |
| **Qualification:** | Level 2 Certificate/Award | |  |  |  | | |  |  |  | | |
| **Units:** |  | | | | | | | | | |  |  |
| **Certificate Address:** | Home | Work | FSS | | | | | | | | | |
| **Official Veterinarian (Print Name):** |  | |  | | |  | | | | | | |
|  |  | | | | | |  | | | | | |
| **Signed: Date:** | | | | | | | | | | | | |

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| Line Manager Statement |
| I have discussed the details of the training programme with the candidate and agree that he/she has the opportunity to achieve this qualification.  I am willing to support the candidate by encouraging effort, making time available and providing witness statements as required. I will also allow access to all internal and external verifiers and SQA/FDQ staff. |
| **Full name:**  **Signed: Date:** |

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| Pilgrim House, Old Ford Road, Aberdeen, AB11 5RL [www.foodstandards.gov.scot](http://www.foodstandards.gov.scot/) | Scottish logoshttp://www.brandsoftheworld.com/sites/default/files/styles/logo-original-577x577/public/0017/7147/brand.gif |