



# SCOTTISH ELECTRICAL CHARITABLE TRAINING TRUST

## SJIB ADULT TRAINING SCHEME APPLICATION FORM



Please complete in BLOCK CAPITALS and BLACK INK and return to:

SECTT, THE WALLED GARDEN, BUSH ESTATE, MIDLOTHIAN EH26 0SE  
Tel: 0131 445 5659 E-mail: [admin@sectt.org.uk](mailto:admin@sectt.org.uk) Web site: [www.sectt.org.uk](http://www.sectt.org.uk)

**Applications must be received by SECTT, no later than 30 June<sup>1</sup>**

### DETAILS OF APPLICANT

Surname*	Title																
<input style="width: 90%;" type="text"/>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Mr</td> <td style="width: 15%;"><input type="checkbox"/></td> <td style="width: 15%;">Mrs</td> <td style="width: 15%;"><input type="checkbox"/></td> <td style="width: 15%;">Miss</td> <td style="width: 15%;"><input type="checkbox"/></td> <td style="width: 15%;">Ms</td> <td style="width: 15%;"><input type="checkbox"/></td> </tr> <tr> <td colspan="2">Other</td> <td colspan="6"><input style="width: 90%;" type="text"/></td> </tr> </table>	Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Other		<input style="width: 90%;" type="text"/>					
Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Ms	<input type="checkbox"/>										
Other		<input style="width: 90%;" type="text"/>															
Forenames*	<input style="width: 90%;" type="text"/>																
Address*	N.I. Number*																
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<input style="width: 90%;" type="text"/>	Telephone No.*																
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>																
Town*	Email*																
<input style="width: 90%;" type="text"/>	<input style="width: 90%;" type="text"/>																
Postcode*	Date of Birth*    /    /    Age																
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	Minimum Age 22																

\* mandatory fields

### EDUCATION AND EMPLOYMENT HISTORY (ELECTRICAL)

#### QUALIFICATIONS

<input style="width: 98%;" type="text"/>
<input style="width: 98%;" type="text"/>
<input style="width: 98%;" type="text"/>
<input style="width: 98%;" type="text"/>

#### EMPLOYMENT DETAILS – ELECTRICAL (12 months' relevant site experience required)

NAME	TYPE OF WORK	POSITION	FROM	TO
<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>	<input style="width: 98%;" type="text"/>
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### PREVIOUS TRAINING

Have you previously participated in a Modern Apprenticeship (MA) programme and achieved / part achieved a Level 2 or Level 3 qualification?    Yes     No

If 'Yes' please give a brief description

### ENTRY ASSESSMENT

You will need to sit the entry assessment prior to starting the training programme. This will provide an indication of your suitability and ability to achieve the SVQ Level 3 in Electrical Installation. The assessment will involve numeracy, technical comprehension and a colour vision assessment. Helpful material 'An Introduction to Mathematics' can be found at [www.goo.gl/si79dW](http://www.goo.gl/si79dW).

SECTT will assist and support any needs you may have (e.g. dyslexia, learning difficulties, etc.) and where necessary SECTT will make suitable arrangements in a sympathetic and confidential manner. The information relating to such support will not affect your application for the SJIB Adult Training Scheme.

**SECTT believe in equal opportunities and may need to tailor the assessment to meet the needs of the individual**

<sup>1</sup> Exceptions to the date of 30 June may be considered, if places are available.

**Complete each section below giving as much detail as possible**

**Evidence of work carried out by Applicant**

Locations	Description	Date
	<b>PVC Sheathed Wiring System</b>	
	<b>Conduit</b>	
	<b>Trunking</b>	
	<b>Wire Armour</b>	

**Complete each section below giving as much detail as possible**

**Evidence of work carried out by Applicant**

Locations	Description	Date
	<b>Mineral Insulated Metal Sheathed Cable</b>	
	<b>Cable Tray Systems</b>	
	<b>Circuit Types</b>	
	<b>Other</b>	

**Record of qualifications achieved by Applicant**

Qualifications	Date

**Please enclose all of your certificates with this application, photocopies will be accepted.  
All originals will be returned.**

### The following Colleges run the Adult Training Scheme

Please mark your preferred choice of college<sup>2</sup> in sequential order, i.e. 1, 2...

Dumfries & Galloway College, Dumfries Campus	<input type="checkbox"/>
Dundee & Angus College, Kingsway Campus	<input type="checkbox"/>
Edinburgh College, Sighthill Campus	<input type="checkbox"/>
Glasgow Clyde College, Cardonald Campus	<input type="checkbox"/>
Inverness College UHI	<input type="checkbox"/>
New College Lanarkshire, Motherwell Campus	<input type="checkbox"/>
Perth College UHI	<input type="checkbox"/>
Tullos Training Ltd	<input type="checkbox"/>
West College Scotland, Paisley Campus	<input type="checkbox"/>

### PRIVACY POLICY

The Scottish Electrical Charitable Training Trust (SECTT) collects personal data, which will only be used for the purpose of managing the SJIB Training Schemes. Your personal data will only be shared with relevant third parties e.g. Skills Development Scotland (SDS), Scottish Joint Industry Board (SJIB), Scottish Qualifications Authority (SQA), Instructus (Modern Apprenticeship registration), Approved Centres (colleges) and Employer/Trainee. We hold your personal data to ensure we have accurate records for managing your training and for awarding your qualifications.

A copy of SECTT's Privacy Policy can be viewed at <http://www.sectt.org.uk/documents/PrivacyPolicy.pdf>

#### APPLICANT SIGNATURE

I confirm that the information provided is correct, to the best of my knowledge and belief.

I consent to SECTT holding data, using it and sharing it for the purpose of managing the SJIB Adult Training Scheme.

**Please tick to confirm  and sign below**

Signed:

Date:

#### EMPLOYER APPROVAL

The named applicant is aged 22 years or over, has at least 12 months' relevant electrical experience and will be supervised for the period of training.

I confirm that the named applicant will be registered on the SJIB Adult Training Scheme and that I will abide by the conditions set out in that Scheme.

I consent to SECTT holding data, using it and sharing it for the purpose of managing the SJIB Adult Training Scheme.

**Please tick to confirm  and sign/complete below**

Organisation name:

Signed:

Print Name:

Position of Signatory:

Tel No.:

Company address:

Town:

Postcode:

Date:

Email:

### FOR SECTT USE ONLY

Date Application Received:

Successful/Unsuccessful:

Signed:

Date:

Date 'Received Application' Letter Sent:

<sup>2</sup> You may not be offered your first choice but we will try to accommodate you preferred college.