

Understand and Use Forms

This session was first delivered to a group of unemployed adults of varying abilities and backgrounds.

Main Curriculum References

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|---------|---|
| Rw/E2.1 | - Read and understand words on forms related to personal information (e.g. first name, surname, address, postcode, age, date of birth). |
| Rw/E3.2 | - Read and understand words and phrases commonly used on forms. Know that some words and phrases are commonly used on forms (e.g. occupation, employer, make payable to, direct debit, block capitals). |

Preparation

- Build up a bank of materials. Many forms are available at post offices: passport, driving licence, change of address, etc.
Other ideas (the list is endless) include: sports club membership, insurance, National Trust, school forms for going on trips, and job applications.

Delivering the session

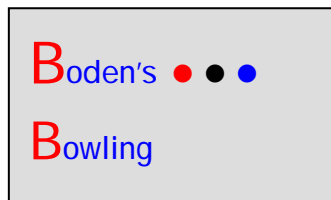
- An introduction to the relevance of form filling should start the session. Clarify the need for filling in forms and stress that forms are a major part of everyday life.
- Encourage lots of speaking and feedback from the students. Use this to list many types of 'form' words and phrases. Clarify and add to the list as needed.
- Now remove list from whiteboard or flip chart and introduce the matching exercise on page 2.
- Ask students to cut up page 2 and then stick matching sections together on another sheet of paper or card. Alternatively, the page can be laminated, cut up and made into a reusable matching game.
- Pages 3-5 are simple forms to be completed by students.

Follow on ideas

- Using their completed forms, the learners ask each other questions.
- Using blank forms, the students ask each other questions and record the information (i.e. filling in a form with someone else's details).
- There is a related interactive activity at the DFES Embedded Learning Portal http://www.dfes.gov.uk/readwriteplus/learning_material/portal/understanding-words-on-forms_lit_e3/m01/t03/index.htm

OCCUPATION	Names of people who write a letter to say they have seen you working
EMPLOYER	Any certificates you have from exams or tests in school or college
MAKE PAYABLE TO	The name of the town or city where you were born
QUALIFICATIONS	The job you do
REFEREES	Details about whether you have ever been found guilty of a crime
DIRECT DEBIT	Write the name on the cheque to
DECLARATION	The person you work for
CRIMINAL CONVICTIONS	Surname
NATIONALITY	Information about you
PLACE OF BIRTH	The country a person was born in
RELIGION	Capital letters
PERSONAL DETAILS	A way of paying a bill monthly through the bank
FAMILY NAME	The church you were baptised into if any
BLOCK CAPITALS	The place where you sign to say you have told the truth on the form

Application Form



1. Personal Details	
Title (<i>Rev/Dr/Mr/Mrs/Miss/Ms</i>)	<input type="text"/>
Surname/Family Name (<i>Block capitals</i>)	
First name/s	
Address	
Postcode	
Tel. No.	Daytime
Fax	Evening
	Email
Date of birth	<input type="text"/>
Present occupation	<input type="text"/>
Religious affiliation (optional)	<input type="text"/>

For Office Use
Ref No:

2. Disability / Special Needs

Please enter the appropriate code in the box provided if you have a physical or sensory disability which might in some way affect your work at the establishment.

Disability, special needs or medical condition codes

0 None
 1 You have a specific learning difficulty (for example, dyslexia)
 2 You are blind or partially sighted
 3 You are deaf or hard of hearing
 4 You use a wheelchair or have mobility difficulties
 5 You have Autistic Spectrum Disorder or Asperger Syndrome
 6 You have mental health difficulties
 7 You have a disability that cannot be seen, for example, diabetes, epilepsy or a heart condition
 8 You have two or more of the above
 9 You have a disability, special need or medical condition that is not listed above

3. Criminal Convictions

Do you have any criminal convictions? Yes No

4. Name and address of referee

6. Declaration (UK Data Protection Act)

I confirm that the information on this form is true, complete and accurate. By submitting this form, I agree to the company processing personal data contained in this form, or other data which the company may obtain from me or other people in connection with my application.

Applicant's signature Date

5. Where did you hear about this job?

Publication yes / no
 If yes, which?.....
 Internet yes / no
 Word of mouth yes / no
 Previous student yes / no
 Other (please state)

Please return completed application form to:

Tom Seagrove
Boden's Bowling
Aston Industrial Estate
Aston
A23 1QH

FORMS, FORMS, FORMS.



You are moving in to a new flat. The contract has to be signed.
Complete the form and sign in the right place.

Application for Tenancy

Please complete the form in Block Capitals

Name: _____

Insurance number: _____

Home address: _____

City: _____ County: _____

Post Code: _____

Home phone: _____ Work phone: _____

Employer: _____

Job Title: _____

Length of employment: _____

Supervisor's name: _____

Have you ever been convicted of a crime? _____

If "Yes", please explain: _____

References

Please list the names, addresses, and phone numbers of three people you would like to use as character references (please list only people you have known for at least a year):

Name: _____
Address: _____
County: _____ Post code: _____
Phone: _____
Relationship: _____

Name: _____
Address: _____
County: _____ Post code: _____
Phone: _____
Relationship: _____

Name: _____
Address: _____
County: _____ Post code: _____
Phone: _____
Relationship: _____

Declaration

I declare that the information I have provided is true

(signature) Date