



HADDON TRAINING LIMITED  
**LEARNER APPLICATION FORM**  
**HORSE CARE**

|                |                      |  |  |
|----------------|----------------------|--|--|
| <b>Name</b>    |                      |  |  |
| <b>Surname</b> |                      |  |  |
| <b>Address</b> |                      |  |  |
|                |                      |  |  |
|                | <b>Postcode</b>      |  |  |
| <b>Tel</b>     | <b>Mobile</b>        |  |  |
| <b>E-Mail</b>  | <b>Date of Birth</b> |  |  |

|                |  |                                  |       |               |                       |
|----------------|--|----------------------------------|-------|---------------|-----------------------|
| <b>N.I. No</b> |  | <b>Are you married?</b>          | Y / N | <b>Male</b>   | <input type="radio"/> |
|                |  | <b>Do you have any children?</b> | Y / N | <b>Female</b> | <input type="radio"/> |

| I am interested in the following area |                       |                               |                       |
|---------------------------------------|-----------------------|-------------------------------|-----------------------|
| Breeding                              | <input type="radio"/> | Care of the Performance Horse | <input type="radio"/> |
| Schooling                             | <input type="radio"/> | Driving                       | <input type="radio"/> |
| Exercise                              | <input type="radio"/> | Racing                        | <input type="radio"/> |

| Placement Details                          | Yes                   | No                    |
|--|-----------------------|-----------------------|
| I want to work but still live at home      | <input type="radio"/> | <input type="radio"/> |
| I am happy to work and live away from home | <input type="radio"/> | <input type="radio"/> |

**Please give brief details of previous employment or work experience, and any qualifications that are relevant to your chosen vocational area. Tell us why you are interested in training and what your ultimate career goals are.**

| Careers Advice from Connexions                           |
|--|
| I have spoken to a Careers Advisor <input type="radio"/> |

| Which Connexions Office did you go to |
|---------------------------------------|
|                                       |

| Have you ever been on any of the schemes below | Yes-Finished          | Yes-Not Finished      | No                    |
|--|-----------------------|-----------------------|-----------------------|
| Advanced Apprenticeship                        | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Apprenticeship                                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| Other work based training (NVQs)               | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

| If yes then please give details of which one and when you were on it |
|--|
|  |

**Haddon Training strives to be an equal opportunities employer and monitors the effectiveness of its policy. The information is used for monitoring purposes only. Please tick your ethnic origin.**

|                        |                               |                             |  |
|------------------------|-------------------------------|-----------------------------|--|
| White                  | Asian – Pakistani             | Mixed – White/Black African |  |
| Black Caribbean        | Asian – Bangladeshi           | Mixed – White/Asian         |  |
| Black African          | Chinese                       | Other mixed background      |  |
| Other Asian background | Other Asian background        | Other ethnic background     |  |
| Asian Indian           | Mixed – White/Black Caribbean | Prefer not to say           |  |

| Subject | GCSE                  | AS Level              | A Level               | Grade | Year Achieved |
|---------|-----------------------|-----------------------|-----------------------|-------|---------------|
| Maths   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |       |               |
| English | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |       |               |
| IT      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |       |               |
|         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |       |               |
|         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |       |               |
|         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |       |               |
|         | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |       |               |

**Please supply copies of certificates for all qualifications. If you have any extra qualifications please attach a separate piece of paper with full details.**

| HISTORY & SUPPORT                                     |  | YES | NO |   |  | YES | NO |
|---|--|-----|----|---|--|-----|----|
| 1. Do you wear glasses?                               |  |     |    | 8. Do you have diabetes?  |  |     |    |
| 2. Are you colour blind?                              |  |     |    | 9. Do you suffer from epilepsy?                                     |  |     |    |
| 3. Do you have any allergies?                         |  |     |    | 10. Do you suffer from asthma?                                      |  |     |    |
| 4. Do you need help with reading, writing or numbers? |  |     |    | 11. Do you have any mobility difficulties?                          |  |     |    |
| 5. Are you dyslexic or dyspraxic?                     |  |     |    | 12. Do you have any other medical conditions we should be aware of? |  |     |    |
| 6. Do you have a Statement of Educational needs?      |  |     |    | 13. Have you been in trouble with the police?                       |  |     |    |
| 7. Do you have difficulties with hearing?             |  |     |    | 14. Is there any other special support or assistance you need ?     |  |     |    |

|   |
|---|
| <b>I have an employer who I would like to be placed with:</b> |
| Name of Company   |
|   |
| Name of Contact   |
|   |
| Telephone Number  |
|   |

**We are required by the Data Protection Act 1998 to get your permission to process any information on this form. Please sign below the following declaration:**  
I confirm the information on this form is correct to the best of my knowledge and agree to Haddon Training processing any data on the form as required for my training.

|  |  |  |  |
|--|--|--|--|
| <b>Dates I am available for an Interview</b> |  | <b>Date I would be available to start training</b> |  |
|--|--|--|--|

|                  |  |             |  |
|------------------|--|-------------|--|
| <b>Signature</b> |  | <b>Date</b> |  |
|------------------|--|-------------|--|

|  |  |
|--|--|
| <b>Parent/Guardian Name, Address &amp; Tel No if different to yours (if you are under 18 years old you <u>must</u> get either your parent or guardian to sign this form)</b> |  |
|  |  |
| <b>Signature of Guardian</b>   |  |

|  |                       |                    |                       |                      |                       |                        |                       |
|--|-----------------------|--------------------|-----------------------|----------------------|-----------------------|------------------------|-----------------------|
| <b>How did you hear about Haddon Training?</b> |                       |                    |                       |                      |                       |                        |                       |
| Connexions Office                              | <input type="radio"/> | Careers Literature | <input type="radio"/> | Advertising          | <input type="radio"/> | Magazine Article       | <input type="radio"/> |
| School Careers Fair                            | <input type="radio"/> | Employer           | <input type="radio"/> | Taster Day/ Roadshow | <input type="radio"/> | Other (Please specify) |                       |