



Skills for Learning Professionals

# General Professional Recognition Learning and Skills (England)

## GPRLS All Areas of Learning

### Application Form

**Please refer to the accompanying guidance document prior to completing this form**

Applicant Name:	
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IfL Registration Number	
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Please indicate your subject specialism here:
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Are you currently in the:	Full teacher role	Please tick <input type="checkbox"/>
	Associate teacher role	<input type="checkbox"/>

Standards Verification UK is a wholly owned subsidiary of Lifelong Learning UK and is responsible for the administration of the General Professional Recognition Learning and Skills (England) scheme.

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## General Professional Recognition Learning and Skills (England)

### Introduction

Information about how to complete this application form is given in the accompanying guidance document. This includes the need to obtain your registration number from the Institute for Learning as we will use this as your unique identifier number.

You should start by considering whether you meet the eligibility criteria. The criteria are set out on page 5 and Appendix 2 of the *Guidance for Applicants* document.

Once you have read the *Guidance for Applicants* document you may wish to discuss with your line manager or your local Professional Development Centre whether GPRLS is an appropriate route for you. Alternatively you might like to contact the LLUK Information and Advice service on 020 7936 5798 or email [advice@lluk.org](mailto:advice@lluk.org).

If you decide to make an application for Professional Recognition, please

1. follow all the instructions carefully,
2. fill in all the areas of the application form as clearly as possible and
3. make sure that you have enclosed all the required documents and information.

Where possible we would prefer to receive completed forms word-processed. You can request an electronic version from a member of the GPRLS team by emailing [recognition@svuk.eu](mailto:recognition@svuk.eu) or by calling 0113 241 0435.

If you have any generic teaching qualification, please indicate the qualification you possess by completing the table on page 7. You may also wish to consult the Tariff Database of teacher training qualifications to check how far any legacy ITT qualifications meet the new qualification requirements. This can be accessed via the SVUK website, <http://www.standardsverificationuk.org/2924.htm>.

### Applicant's Declaration

Please place a ✓ next to the elements below to indicate that you have included everything we need. **Your application will be returned if it is not complete.** All applications and supporting documents should either be submitted in paper form or electronically, and you are advised to keep a copy for yourself.

#### Part 1

	All sections of this application form
	Two signed references on headed paper. For electronic submission these should be scanned
	Authentication and Validation Statement (part of the form)
	Most recent job description(s)

#### Part 2

	I declare that the responses to all the sections are my own work and that any material adapted from other sources has been correctly referenced.
	I declare that I have experience in the teaching role for which I have applied for recognition
	I declare that the information provided in this form is accurate to the best of my knowledge.
	I agree to SVUK using the information contained within the documents for evaluation purposes; (see the Data Protection Statement on the following page)

I wish to apply for Professional Recognition through the General Professional Recognition Process, and have completed or included all of the required documentation in support of my application

Name (BLOCK CAPITALS):.....

Signature: .....

Date: .....

Please post your completed application to:

GPRLS  
Standards Verification UK  
4<sup>th</sup> Floor  
36 Park Row  
Leeds  
LS1 5JL

Or send electronically to: [recognition@svuk.eu](mailto:recognition@svuk.eu)

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## DATA PROTECTION STATEMENT

Standards Verification UK wishes to alert the applicant to the fact that the information collected on this application will be held and processed for such purposes as statistical analysis. SVUK guarantees that such data will be handled collectively, with confidentiality, in anonymity and in compliance with our duties and obligations under the Data Protection Act. Details relating to successful applicants will be shared with the Institute for Learning (IfL).

### Independent Evaluation

As part of Standards Verification UK's quality assurance policy, independent evaluators are commissioned on an annual basis to assess and appraise the services offered by Standards Verification UK. If you would prefer not to be contacted by our independent evaluators please tick (✓) the box below.

I do **not** consent to my details being passed on to Standards Verification UK's independent evaluators

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## Personal Details

Title	
Surname	
Forename(s)	
Sex; M or F	
Nationality	
National Insurance number	
Address	
Town	
County	
Postcode	
Contact telephone numbers:	
work	
home	
mobile	
E-mail address	

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**THIS PAGE SHOULD REMAIN BLANK**

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### Generic Teaching Qualifications

If you are already qualified or began teaching in the FE/learning and skills sector before 1 September 2001 you may not be required to qualify further.

However if you are required to gain QTLS or ATLS status under the 2007 Regulations by your employer or you yourself choose to gain this status, then you may wish to pursue the Recognition route. By this pathway your prior qualifications, knowledge, skills and experience can count towards being recognised as meeting the new standards without you having to take the new qualifications.

Please list in the table below any generic teaching qualification that you have  
Eg Further Education Teaching Certificate (FETC) Stage 1 Level 4 (old NQF);  
Endorsed Stage 1 Awards from English HEIs

Name of Qualification	Date obtained

### Present Employment Details

Job title	
Institution	
Years in post with current employer	

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**If you work for or are contracted to more than one institution, please use the space below to provide us with the details of each institution and your responsibilities:**

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**Please provide details of the learners for whom you have been responsible in either the Full teaching role or Associate teaching role within the preceding 24 months. Please note if you intend to apply for QTLS through IfL you must provide evidence that you have currency of practice in the full role.**

Subject specialism	Context (e.g. College/prison)	From/to (e.g. Sept 06-Dec 06)	Hours per week	Level of learners (e.g. L1/L2)	Please indicate Full or Associate role (F/A)

**Qualifications**

Please list any significant and relevant accredited qualifications including those which can be authenticated by your referee. Please list the most recent first.

<b>Title and level</b> (HE, Post-graduate or NQF)	
<b>Validating/accrediting body and institution</b> (e.g. University of Oxbridge/ Newton College)	
<b>Length of course</b> <b>PT/FT</b> (e.g. 10 weeks FT)	
<b>Teaching Practice</b> <b>Assessed hours if part of the qualification</b> (e.g. 8)	
<b>Date obtained</b> (e.g. MM/YYYY)	

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<b>Title and level</b> (HE, Post-graduate or NQF)	
<b>Validating/accrediting body and institution</b> (e.g. University of Oxbridge/ Newton College)	
<b>Length of course</b> <b>PT/FT</b> (e.g. 10 weeks FT)	
<b>Teaching Practice</b> <b>Assessed hours if part of the qualification</b> (e.g. 8)	
<b>Date obtained</b> (e.g. MM/YYYY)	

<b>Title and level</b> (HE, Post-graduate or NQF)	
<b>Validating/accrediting body and institution</b> (e.g. University of Oxbridge/ Newton College)	
<b>Length of course</b> <b>PT/FT</b> (e.g. 10 weeks FT)	
<b>Teaching Practice</b> <b>Assessed hours if part of the qualification</b> (e.g. 8)	
<b>Date obtained</b> (e.g. MM/YYYY)	

<b>Title and level</b> (HE, Post-graduate or NQF)	
<b>Validating/accrediting body and institution</b> (e.g. University of Oxbridge/ Newton College)	
<b>Length of course</b> <b>PT/FT</b> (e.g. 10 weeks FT)	
<b>Teaching Practice</b> <b>Assessed hours if part of the qualification</b> (e.g. 8)	
<b>Date obtained</b> (e.g. MM/YYYY)	

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**Professional experience, most recent first**

From/to	Organisation and address	Position	Hours per week	Role and responsibilities



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**Other information relevant to your career history as a teacher**

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**Present position**

**Please comment on your current role(s) if not reflected fully in your job description(s)**

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**Other information relevant to your subject specialism or to generic teaching (e.g. research, exhibitions, lectures, conferences or publications)**

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**Continuing professional development in teaching and learning. Please only include any relevant CPD undertaken within the last 5 years. Please list the most recent first**

**(a) Subject based**

Date	CPD (e.g. course, event, conference)	Duration	Location	Award and Awarding Institution (if accredited)

**(b) Generic**

Date	CPD (e.g. course, event, conference)	Duration	Location	Award and Awarding Institution (if accredited)

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**Further evidence (including regular/recent professional reading and reflection) E.g. TES, THES, or NIACE.**

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**A: Professional Values (Overarching Professional Standards Domain A)**

***This section is judged solely on the contents of the references***

Please read the guidance carefully and ensure that your referee has given clear indications and examples of your professional contribution.

**B: Learning and Teaching (Overarching Professional Standards Domain B)**

***This section is judged solely on the contents of the references***

Please read the guidance carefully and ensure that your referee has given clear indications and examples of your professional practice.

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**C: Specialist Learning and Teaching (Overarching professional Standards Domain C)**

**Please refer to the Guidance for Applicants relevant to your role (Associate or Full) to ensure that you have covered all the requirements for the appropriate role-related task.**

**Task 1** Total word count **should not** exceed 500; anything beyond 550 words will be ignored.

Total Word Count: 500

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**Task 2** Total word count **should not** exceed 500; anything beyond 550 words will be ignored

Total Word Count: 500

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**D: Planning for Learning (Overarching professional Standards  
Domain D)**

**Please refer to the Guidance for Applicants relevant to your role  
(Associate or Full) to ensure that you have covered all the requirements  
for the appropriate role-related task**

Total word count **should not** exceed 750; anything beyond 825 words will be ignored

Total Word Count: 750

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**E: Assessment for Learning (Overarching Professional Standards  
Domain E)**

**Please refer to the Guidance for Applicants relevant to your role  
(Associate or Full) to ensure that you have covered all the requirements  
for the appropriate task**

Total word count **should not** exceed 600 words; anything beyond 660 words  
will be ignored.

Total word count: 600

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**F: Access and Progression (Overarching Professional Standards  
Domain F)**

**Please refer to the Guidance for Applicants relevant to your role  
(Associate or Full) to ensure that you have covered all the requirements  
for the appropriate task.**

Total word count **should not** exceed 500 words; anything beyond 500 words  
will be ignored.

Total word count: 500

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**Please use this space to include any other information which you consider to be relevant to your application**

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## **Referees**

The accompanying guidance notes provide further advice on choosing the most appropriate referees. You may wish to discuss your selection with your line manager, local Professional Development Centre or the LLUK Information and Advice Service (*a service dedicated to the support of professional development enquiries relating to the FE/ learning and skills sector*) on 020 7936 5798 or email [advice@lluk.org](mailto:advice@lluk.org)

An additional guidance document, Guidance for Referees, has been provided in the pack to help both you and your referees.

**Please ensure that your chosen referees each have a copy of the guidance notes.**

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## Subject Specialist Referee Form

**To be filled out by the subject specialist referee and returned to the applicant**

Title	
Surname	
Forenames	
Address	
Town	
County	
Postcode	
Contact telephone numbers:	
work	
mobile	
fax	
e-mail address	
Job title	
Qualifications	
Place of work	
What is your professional relationship with the applicant?	

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<p>Why do you feel able to comment on the applicant's professional practice?</p>	
<p>If you are the authenticating referee, what experience or expertise do you have in quality assurance?</p>	

Signature: .....

Date: .....

**Independent Evaluation**

As part of Standards Verification UK's quality assurance policy, independent evaluators are commissioned on an annual basis to assess and appraise the services offered by Standards Verification UK. If you would prefer not to be contacted by our independent evaluators please tick (✓) the box below.

I do **not** consent to my details being passed on to Standards Verification UK's independent evaluators

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## Second Referee Form

**To be filled out by the referee and returned to the applicant**

Title	
Surname	
Forenames	
Address	
Town	
County	
Postcode	
Contact telephone numbers:	
work	
mobile	
fax	
e-mail address	
Job title	
Qualifications	
Place of work	
What is your professional relationship with the applicant?	

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<p>Why do you feel able to comment on the applicant's professional practice?</p>	
<p>If you are the authenticating referee, what experience or expertise do you have in quality assurance?</p>	

Signature: .....

Date: .....

**Independent Evaluation**

As part of Standards Verification UK's quality assurance policy, independent evaluators are commissioned on an annual basis to assess and appraise the services offered by Standards Verification UK. If you would prefer not to be contacted by our independent evaluators please tick (✓) the box below.

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**Other evidence presented by the applicant: please list (For example, learner achievement data, CPD record, observation reports, SAR)**

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**Authenticating Referee – please complete the following Declaration**

(please mark ✓ in each box)

I declare that I understand the role the supporting documentation and evidence is intended to fulfil in support of the applicant's case for professional recognition.	
I declare that, to the best of my knowledge, the supporting documentation and evidence seen is appropriate, substantiates and supports the applicant's claim for recognition in the role in which they have applied, and is authentic.	
I acknowledge that SVUK may request to see the original evidence I have listed throughout this application as part of their commitment to quality assurance.	

Signature of referee: .....

Printed name: .....

Date: .....