

Telephone: 020 8547 6764

Dear Learner,

Kingston Adult Education is committed to providing a learning environment that promotes Equality of Opportunity and we strive to support all our learners to succeed on their course.

We would be grateful if you could complete the attached form to disclose the nature of any disability, mental health problem, learning difficulty, or medical condition that may impact on your learning. The more we know about the needs of our learners, the better we can meet those needs.

Additional Learning Support can be provided inside or outside of class, to help learners achieve their learning goals. We can discreetly arrange many types of support to suit individual needs, including, specialist equipment; adapted materials; language, literacy and numeracy help; dyslexia support; personal assistance.

If you decide to complete the form we ask you to confirm that you are happy for us to advise your tutors, to enable us to support you effectively. The information provided will also be used to update our information system. If you request Additional Learning Support our Inclusive Learning Co-ordinator will contact you to discuss your needs confidentially.

Kind Regards,

Suzanne Dare

Suzanne Dare – Inclusive Learning Co-ordinator

Thank you for helping us to make Kingston Adult Education an inclusive learning environment.

If you would like to receive this form in enlarged format, need help filling it in or would like to discuss your needs before completing, please ring 020 8547 6764.

The attached form is sent to learners who have indicated a disability, learning difficulty and/or mental health problem on enrolment. It is also sent to those whose enrolment details are incomplete.

The information you provide is confidential.

If you do not consider yourself to have a disability, learning difficulty, mental health difficulty or medical condition that may affect your learning please ignore the form.

Name	Learner Ref
Course	Course Code
Contact Number	

Please complete the boxes below to indicate the nature of any disability or difficulty that you have or, if you prefer, use the space provided on the back of this page to describe your learning disability, difficulty or medical condition that may affect your learning, in your own words.

A Please tick <i>one</i> box that best describes your difficulty / disability			
Learning Disability / Difficulty	Please tick <input type="checkbox"/> ✓	Learning Disability / Difficulty	Please tick <input type="checkbox"/> ✓
Visual impairment		Moderate learning difficulty	
Hearing impairment		Severe learning difficulty	
Difficulty that affects mobility		Dyslexia	
Other physical disability		Dyscalculia	
Emotional/behavioural difficulties		Other specific learning difficulty	
Mental ill health		Aspergers syndrome	
Temporary disability after illness		Autism spectrum disorder	
Profound or complex disabilities		Multiple learning difficulties	
Multiple disabilities		Other difficulty	
Other disability		Other medical condition (eg epilepsy, asthma)	

B Please tell us who you are willing to share the above information with:
I agree to the above information being updated on the college information system (please tick) <input type="checkbox"/> Yes <input type="checkbox"/> No - this may affect the support that can be given.
I would like to share this information with my tutors to help them to support me effectively. (please tick) <input type="checkbox"/> Yes <input type="checkbox"/> No - this may affect the support that can be given.

C Would you like any additional support? (Please tick one)	
<input type="checkbox"/> Yes	Please tell us more on the back of this page - our Inclusive Learning Co-ordinator will contact you to discuss your needs.
<input type="checkbox"/> No	We will not contact you unless we need to clarify any support required to meet your medical needs.

Signed..... Date.....

Please use the pre-paid envelope provided to post this form directly to the Inclusive Learning Co-ordinator, or return this form to the reception area at your centre.

This information is treated as confidential.

Please tell us more about your disability, difficulty or medical condition and the support you may need.....

Please return to Suzanne Dare, Inclusive Learning Co-ordinator, Room 48a, North Kingston Centre, Richmond Road, Kingston upon Thames, KT2 5PE, or to the Main Office/Reception of the Centre you attend.