**INDIVIDUAL LEARNING PLAN (ILP)**

**Non accredited Courses**

**6 Sessions and above**

|  |  |
| --- | --- |
| **Name:****Learner No:****Tutor:** | **Centre:****Course Title****Course Code:****Start Date:****End Date:** |
| **Sometimes your tutor might decide to capture your progress and achievement.** Please tick the boxes below to show consent:1. I am happy for you to record my voice 2. I am happy for you to take photographs 3. I am happy for you to use a video 4. None of these In accordance with the Data Protection Act 1988, you have a greed we may use these images in printed publications and on our website , produced by Medway adult learning, for promotional purposes |

Learners Signature………………………… Date……………………………

Tutor’s Signature…………………………… Date……………………………

**INITIAL ASSESSMENT SUMMARY for Functional Skills**

**(DP’s to signpost to PISCs below level 2 or not known)**

|  |  |
| --- | --- |
| Assessment | Actions/ Updates(Signpost Learner to PAL) |
| EnglishDo you hold a GCSE Grade C/Equivalent or above in this subject?  | Would you like a funded assessment and further training Y/N |
| MathsDo you hold a GCSE Grade C/Equivalent or above in this subject? | Would you like a funded assessment and further training Y/N |
| IT Skills IT user experience |  | Would you like further training on IT Skills Y/N |
| Do you have use of a computer Y/N |  |  |

|  |  |
| --- | --- |
| Employability Skills | Are you in employment Y or NDo you have a current CV Y or NWould you like further support in the following:* Confidence building Y or N
* CV writing Y or N
* Interview techniques Y or N
* Carrying out job search Y or N

Any yes circled signpost to PAL |

**My goals for the course taken from Initial Assessment and during the course:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Individual Learning Goals** | **Updates** | **Achieved – date and****Tutor signed** |
| Aim 1 |  |  |  |
| Aim 2 |  |  |  |
| Aim 3 |  |  |  |

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| PAM/PAL Quality review of ILP’s (for Office): |

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| --- |
| **Date:****Initial:** |

**Course Objectives**

(taken from Course information sheet) **Initial Assessment, Progression and Achievement**

Please rate each area from 1 to 5: the lowest being 1 or where you are least confident and 5 being the highest.

Number of course weeks:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Group Objectives** | **Initial Assessment** **Date of Course****Week No:** | **Self-Assessment** **Date of Course****Week No:** | **Self-Assessment** **Date of Course****Week No:** | **Self-Assessment** **Date of Course****Week No:** | **Self-Assessment** **End of Course Date****Week No:** |
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| **Learning Needs Identified on Induction:**(within and outside subject areas including English, Maths and Employer) |
| **Curriculum Development Action Plan:**(within subject area |
| **Curriculum Development Action Plan:** (outside subject area and sign post to relevant department) |

Learner Signature……………………………… Date………………… Tutors Signature………………………….. Date………………

**Learner Review and Tutor Feedback**

Remember to state learning rather than activities completed

|  |
| --- |
| **1 Review date:…………………** |
| **2 Goals set at this review**(From initial assessment and self-assessment) |
| **3 Review**(Subject Area, English, Maths, Employability) |
| **4 Discussion on Equality and Diversity, Health & Safety and Safeguarding:** (Equality & Diversity = Age, Disability, Gender Reassignment, Race, Religion or belief, Sex, Sexual Orientation, Marriage & Civil Partnerships, Pregnancy & Maternity**,** Every person matters = Being healthy; Staying safe; Enjoying and Achieving; Make a positive contribution; Achieve Economic Well Being. Health & Safety) |
| **Learners Feedback**(On areas 1,2,3,4) |
| **Tutors Feedback**(On areas 1,2,3,4) |

Learners Signature……………………….. Date…………………………… Tutors Signature……………………….. Date…………………..

**Learner Review and Tutor Feedback**

Remember to state learning rather than activities completed

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| --- |
| **1 Review date:…………………** |
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| **Learners Feedback**(On areas 1,2,3,4) |
| **Tutors Feedback**(On areas 1,2,3,4) |

Learners Signature……………………….. Date…………………………… Tutors Signature……………………….. Date…………………..

**Learner Review and Tutor Feedback**

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| **Learners Feedback**(On areas 1,2,3,4) |
| **Tutors Feedback**(On areas 1,2,3,4) |

Learners Signature……………………….. Date…………………………… Tutors Signature……………………….. Date…………………..

**Learner Review and Tutor Feedback**

Remember to state learning rather than activities completed

|  |
| --- |
| **1 Review date:…………………** |
| **2 Goals set at this review**(From initial assessment and self-assessment) |
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| **Learners Feedback**(On areas 1,2,3,4) |
| **Tutors Feedback**(On areas 1,2,3,4) |

Achievement Y/N Destination

Learners Signature……………………….. Date…………………………… Tutors Signature……………………….. Date…………………..

**Possible Learner Destination**

**Learners Name Education Destination Employment Destination**

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| --- |
| **Information, Advice and & Guidance****(Discuss with learner destination and progression routes)****Explain what options the tutor has given you for your progression from the course?** |

Achievement Y/N

Destination

Tutor Signature:……………. Date:………… Learners Signature:…………… Date:………..

PAM/ IQA Signature:……………… Date:…………………

**Destination – education**

**01 Another course in the same subject**

**02 Another course in a different subject**

**03 Higher level course with Adult Education**

**04 Higher level course with Further Education**

**05 Higher level course with Higher Education**

**06 Full time education or training**

**07 Other**

**Destination – employment**

**A1 Full time employment**

**A2 Part time employment**

**A3 Self employed**

**A4 Economically inactive (of working age, not employed, not actively seeking work and not in full time education).**

**A5 Unemployed**

**A6 Volunteering or community work.**

**A7 Other (including retired)**