

Learner NVQ Expression of Interest Form

Please complete one form per applicant expressing an interest. This form is to be read in conjunction with the ESA Terms and Conditions for NVQ Registrations document. If you have not received these please contact nvqtraining@esa.uk.com Thank you.

Surname	(Please print)	
Forenames	(Please print)	

Note: The name given above is for the **candidate**. If you are competing this for an employee, please state in the section at the end.

Home address			
Post code		Email address	
D.O.B		Mobile number	

Qualifications interested in (please tick all that apply)	✓
Level 2 NVQ Diploma in Specialist Installation Occupations (Door, Gate and Shutter Systems Installation & Maintenance)	
Level 2 NVQ Certificate in Specialist Installation Occupations (Loading Bay Equipment – Installation or Maintenance)	

What can you prove competency in?

Please **ONLY** tick the areas you are competent in. This will be verified by your assessor

Industrial and/or commercial door system types:			
Roller Shutter Door Installation		Roller Shutter Door Repair	
Sectional Overhead Door Installation		Sectional Overhead Door Repair	
Horizontal Acting Door Installation		Horizontal Acting Door Repair	
Power Operated Gate Installation		Power Operated Gate Repair	
Power Operated Barrier Installation		Power Operated Barrier Repair	
Fire Resisting Door Installation		Fire Resisting Door Repair	

Pedestrian and/or residential door system types:				
Domestic Roller Shutter Garage Door Installation		Domestic Roller Shutter Garage Door Repair		Domestic Roller Shutter Garage Door Service
Domestic Panel Type Garage Door Installation		Domestic Panel Type Garage Door Repair		Domestic Panel Type Garage Door Service
Domestic Power Operated Garage Door Installation		Domestic Power Operated Garage Door Repair		Domestic Power Operated Garage Door Service
Manual Sliding Door Installation		Manual Sliding Door Repair		Manual Sliding Door Service
Swing and Folding Door or Gate Installation		Swing and Folding Door or Gate Repair		Swing and Folding Door or Gate Service
Power Operated Gate Installation		Power Operated Gate Repair		Power Operated Gate Service
Power Operated Barrier Installation		Power Operated Barrier Repair		Power Operated Barrier Service
Fire Resisting Door Installation		Fire Resisting Door Repair		Fire Resisting Door Service
Power Operated Slide, Swing or Folding Door Installation		Power Operated Slide, Swing or Folding Door Repair		Power Operated Slide, Swing or Folding Door Service
Manual and Power Operated Revolving Door Installation		Manual and Power Operated Revolving Door Repair		Manual and Power Operated Revolving Door Service

Loading bay equipment:				
Hinged Lip Dock Leveller Installation		Hinged Lip Dock Leveller Repair		Hinged Lip Dock Leveller Service
Telescopic Lip Dock Leveller Installation		Telescopic Lip Dock Leveller Repair		Telescopic Lip Dock Leveller Service
Drawbridge Dock Leveller Installation		Drawbridge Dock Leveller Repair		Drawbridge Dock Leveller Service
Scissor Lift Installation		Scissor Lift Repair		Scissor Lift Service
Dock Seal/Shelter Installation		Wheel Guide Installation		Vehicle Restraint Installation
Bumper/buffer Installation		Dock/Traffic Light Installation		Control Panel Installation

Learner to complete all the following questions

This will be verified by your assessor during the Assessment process.

Unit 641	YES	NO	?
Do you know how to comply with all relevant workplace health, safety, and welfare legislation requirements?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you able to recognise hazards associated with the workplace that have not been previously controlled and report them in accordance with organisational procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to comply with organisational policies and procedures to contribute to health, safety, and welfare?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to work responsibly to contribute to workplace health, safety and welfare whilst carrying out work in the relevant occupational area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you comply with and support all organisational security arrangements and approved procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unit 642	YES	NO	?
Can you communicate with others to establish productive work practices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you follow organisational procedures to plan the sequence of work?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you maintain relevant records in accordance with the organisational procedures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to maintain good working relationships when working with management, colleagues and customers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Unit 643	YES	NO	?
Can you comply with given information when moving, handling and/or storing resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to comply with relevant legislation and official guidance when moving, handling and/or storing resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to maintain safe working practices when moving, handling and/or storing resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you select the required quantity and quality of resources for the methods of work to move, handle and/or store occupational resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to prevent the risk of damage to occupational resources and surrounding environment when moving, handling and/or storing resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you complete work within the allocated time when moving, handling and/or storing resources?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you comply with the given occupational resource information to move, handle and/or store resources to the required guidance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Units 676, 678, 679, 683, 684	YES	NO	?
Can you interpret the given information relating to the work and resources when installing/repairing door, gate, barrier or loading bay systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to comply with relevant legislation and standards when installing/repairing door, gate, barrier or loading bay systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you maintain safe and healthy working practices when installing/repairing door, gate, barrier or loading bay systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to select the required quantity and quality of resources for the methods of work to install/repair door, gate, barrier or loading bay systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how to minimise the risk of damage to the work and surrounding area when installing/repairing door, gate, barrier or loading bay systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you complete the work within the allocated time when installing/repairing door, gate, barrier or loading bay systems?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Can you comply with the given contract information to install/repair door, gate, barrier or loading bay systems to the required specification?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Candidate declaration:

I understand that the information I have provided will only be used for that intended. I agree to ESA keeping my details for as long as needed that conforms to the regulations laid out by the Awarding Body, Ofqual, CSkills and the Department for Education (DfE)

Learner declaration:

I agree for my personal data to be used by ESA for the above purpose.

Learner signature	
Date	

Employer declaration (only if relevant)

I agree for my employee to register their interest for the NVQ(s) listed above. As their employer the company is financially obligated to fund this applicant and all invoices should be sent to the person named below for payment at the company address given. I understand that my personal data is to be used by ESA for the above purpose.

Employer signature	
Full name (Please print)	
Job title/position (Please print)	
Contact Number (Please print)	
Company name (Please print)	
Company address (including post code)	
Date	
If your company has used an NVQ Assessor previously, please insert the name of the Assessor and the Centre used if known.	

Please complete and return to nvqtraining@esa.uk.com

Or post to

ESA The Barn, Shuttington Fields Farm, Main Road, Shuttington B79 0HA

For office use only

Allocated assessor	
IQA name	

Employer name	
ADSA or DHF member? Y/N	