Form ULR_1



PIOSA ULR Activity Form

Name:				Co	entact No.							
Email:				Мо	onth:							
1. Have you red	cruited any new ULR's? Yes No	o How m	any?	Mer	nbers? Ye	s No	F	low ma	ny?			
2. Have you arr	ranged any Essential Skills Classes	or are you aw	are of someo	ne compl	eting an E	ssential S	kills (Course?	Yes	No	o	
	Please, what classes? Nume	racy Lite	racy ICT	lf y	es, please	complete	e the I	below.				
Name of Employer	Details of Course	Course Provider	Course Location	Start Date	End Date	Enrolment	Male (M)	Female (F)	Age 16-24	Age 24-45	Age 45+	Completions

3. Have you give	en members advice, guidance	and information o	n learning?	Yes	No	How ma	ny?					
4. Were they ref	erred to: FE College Op	en University	In-house	Other								
If 'other' plea	se specify:											
5. Are any mem	bers undertaking other course	es? Yes No	If 'yes', plea	ase compl	ete the de	etails belo	w.					
Name of Employer	Details of Course	Course Provider	Course Location	Start Date	End Date	Enrolment	Male (M)	Female (F)	Age 16-24	Age 24-45	Age 45+	Completions
6. Have you con	npleted any ILNS? Yes N	o How many?										

7. Have yo	ou organi	sed/held any awareness/le	arning events?
Yes	No	How many attended?	
If 'yes', ple	ease spec	cify more details:	
		ked with other ULRs Yes	No

