
APPRENTICESHIP GRANT - APPLICATION

2018-2019 CITB Grants Scheme
1 April 2018 - 31 March 2019

Complete this form to claim apprenticeship grant where your college or training provider is not managed by CITB.

How to claim

1. Complete this form and email it to **customer.servicesYNET@citb.co.uk**
2. You must supply evidence with your claim form from your college or training provider to confirm that your apprentice is registered onto an approved apprenticeship program.
Your claim cannot be processed until we receive this evidence.
3. This application form must be completed and submitted with all supporting evidence **within 20 weeks of the start date of training**. If this form is not submitted within 20 weeks, attendance grant will only be paid from the date on which the form is received.
4. Payments are made every 13 weeks for the duration of the apprenticeship. You must confirm the apprentice is still in training and employment at the end of each 13 week period to receive grant.

For help completing this form, please call **0344 994 4060**.

Evidence to support your claim

To process your claim for apprenticeship grant we require confirmation from your college or training provider that your apprentice is registered onto an approved apprenticeship programme.

This evidence must be provided from the college or training provider on either their headed paper or by their email address and it must contain the following information.

- The full name of the apprentice
- The full VQ diploma or apprenticeship standard course title and level, including the sub-category
- The apprentice's start date with the college or training provider.


If you do not provide the above with your claim form, the form will be sent back to you and this could delay or stop your access to grant funding.

I am supplying evidence from the training provider with my application form

Yes



Click here to visit our website for details about Apprenticeship grant



Don't forget to attach your evidence when you attach your form to your email



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Section 1: Apprentice details

Please provide information about the apprentice you are claiming for

First name	<input type="text"/>
Surname	<input type="text"/>
Date of birth	<input type="text"/>
Permanent National Insurance no.	<input type="text"/>
I confirm that this apprentice is directly employed on a PAYE basis	<input type="checkbox"/> Yes

Your apprentice must be directly employed on a Pay As You Earn (PAYE) basis to be eligible for grant

Section 2: Training details

Please provide information about the course and college or training provider

Title of apprenticeship framework or standard	<input type="text"/>
Level (2 to 6, or SCQF 5 to 11)	<input type="text"/>
Name of college or training provider	<input type="text"/>
College or training provider postcode	<input type="text"/>
UKPRN registration number	<input type="text"/>
Start date of current year of training at college	<input type="text"/>
Initial training start date (if different to above)	<input type="text"/>
Date the apprentice joined employer	<input type="text"/>
Expected training completion date	<input type="text"/>
Expected duration (in months)	<input type="text"/>
No. of days attendance at college each year	<input type="text"/>
Has there been any full time learning at college prior to starting with you for this apprentice?	<input type="checkbox"/> Yes
	<input type="checkbox"/> No
If the above answer is yes, what was the course title of the full time learning?	<input type="text"/>
And what was the duration?	<input type="text"/>

Your apprenticeship must be on the approved list of standards to attract grant support. Click the relevant nation below to view the lists

England & Wales

Scotland

Section 3: Employer details

Please provide information about the employer

Employer name

Employer postcode

CITB Levy registration number

Contact name

Telephone number

Email address

Section 4: Employer declaration

Please read and sign

Before completing this declaration you should read the current CITB Grants Scheme requirements including eligibility, details of terms and conditions and closing dates for grant claims. The scheme requirements can be found at citb.co.uk/grant

By submitting this application I declare that:

- I am authorised by the employer making this claim to complete and submit this application
- the information supplied is true, accurate and complete
- this claim is for employee(s) of this business (or other individual(s) eligible under the scheme requirements) and I have their consent to submit this information
- I have read, understood and accept the scheme requirements and confirm that this application is made in accordance with them
- I have not made any other claim in respect of the same course attendance dates or achievement to which this claim relates

I also confirm that I / we:

- will keep the information detailed in the scheme requirements for the period required
- will promptly provide such information as is reasonably requested by CITB (and/or its agents or auditors) and understand that such requirements

- will involve visits in the business' premises and / or written or verbal requests for information in support of claims made
- will promptly notify CITB of any material change to the information provided in the claim
- will repay any sums requested by CITB (and/or its agents or auditors) in the event of overpayment or ineligible claims

Finally, I understand and agree that CITB (and / or its agents or auditors):

- reserves the right to carry out checks to ensure the claim is valid and made in accordance with the scheme requirements
- may process personal data contained in this claim including disclosure to third parties as may be reasonably necessary (and to the extent that such data relates to employee(s) or individual(s) I confirm that they have expressly consented to such processing)
- may withhold payment of future grant claims or reclaim grant paid under the claim if I or my employer is in breach of this declaration and that this may involve legal proceedings to recover such sums

This section must be completed by a representative of the employer

Employer's signature

Name (print)

Position in company

Date

Fair Processing Notice

The information you provide to us will be used for grant payments and for purposes connected with our role as an Industrial Training Board in accordance with the Industrial Training Act 1982.

Your data will be held securely and treated confidentially and will not be disclosed to external parties other than as required for the purposes described above.

For information explaining your legal rights and how we use your information, please view our Privacy Notice online at citb.co.uk/privacy.