

NCC Operative Learner Questionnaire – Interior Systems

DATA PROTECTION STATEMENT PLEASE READ CAREFULLY

The information you provide for this profile will be held securely within ConstructionSkills.

This information may be used by ConstructionSkills:

- to help determine which NVQ route and level you pursue
- to confirm your ability to provide your assessor with the required documentary evidence
- to form the basis of any initial assessment plan you agree with your assessor.

For those purposes your information may be shared with third parties (including training colleges, assessors and employers).

I consent to the use of my information in this manner. Yes No

Learner Details (All fields must be completed to avoid delays in processing applications)

| | | | |
|----------------------------------|--|--------------|--|
| First Name | | Home Address | |
| Surname | | | |
| Date of Birth | | | |
| NVQ/CSCS/CPCS No | | | |
| Mobile No | | Post Code | |
| E-mail | | | |
| Current Trade | | | |
| Qualification and Level Required | | | |

Employment Status

- Employed**
- Self-Employed** NB: If you are self-employed but working for an employer – tick the sub-contractor option and indicate the employer details below
- Sub-Contractor**

| | |
|----------------------------------|--|
| Employer/Main Contractor | |
| Employer/Main Contractor Address | |
| Contact Name | |
| Contact Tel No | |
| Contact E-mail | |

ADDITIONAL INFORMATION

| Relevant Qualifications or Training (NVQ related) (SSSTS, C&G, IPAF) | | | | | |
|--|------|------|--|-------------|--|
| Title | Date | | | Level/Grade | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Employment History | | | | | |
| Job Title/Role | | From | | To | |
| Employer | | | | | |
| Industry experience | | | | | |
| | | | | | |
| Job Title/Role | | From | | To | |
| Employer | | | | | |
| Industry experience | | | | | |
| | | | | | |

Common Mandatory Units

| Unit | Assessment evidence requirements | Do you carry out this activity on site? |
|------|--|--|
| 641 | Do you conform to general health, safety and welfare in the workplace? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 642 | Do you conform to productive working practices in the workplace? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 643 | Do you move, handle and store resources? (materials) | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Specific Trade Units

QUA810 – L2 NVQ Certificate in Interior Systems (Construction) – Ceiling Fixing

| | | |
|-------|--|--|
| 125v3 | Do you install suspended ceiling systems in the workplace? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|-------|--|--|

QUB810 – L2 NVQ Diploma in Interior Systems (Construction) – Modular Demountable Partitioning

| | | |
|-------|---|--|
| 127v2 | Do you install and relocate modular demountable partition systems in the workplace? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|-------|---|--|

QUC810 – L2 NVQ Diploma in Interior Systems (Construction) – Dry Lining Fixing

| | | |
|-------|---|--|
| 129v3 | Do you install dry lining systems in the workplace? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 130v2 | Do you install plasterboard linings in the workplace? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

QUD810 – L2 NVQ Certificate in Interior Systems (Construction) – Dry Lining Finishing

| | | |
|-------|---|--|
| 618v2 | Do you finish dry lining walls and ceilings in the workplace? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|-------|---|--|