 Human resources

**UCL Funding for Staff Learning and Development**

**Appendices**

**Appendix 1**

**Application for funding**

|  |  |
| --- | --- |
| **Name** |  |
| **Employee Number** |  |
| **Job Title** |  |
| **Faculty & Division/Department** |  |
| **Extension no.** |  |

**Course details**

|  |  |
| --- | --- |
| **Course Title** |  |
| **Academic year of study** |  |
| **Fee for year of study** |  |
| **Training Provider** |  |
| **Start date** |  |
| **Course duration** |  |
| **Method of study** |  |

|  |
| --- |
| Please indicate how this course will contribute to your role and how the effectiveness will be measured |

Please note:

1. This form should be read in conjunction with the UCL Funding for Staff Learning and Development Policy [UCL\_Funding\_For\_Staff\_Learning](#UCL_Funding_For_Staff_Learning).
2. Continued financial support is dependent on satisfactory completion of studies and budget availability.
3. UCL reserves the right to request attendance reports from any course provider.
4. UCL reserves the right to reclaim any financial support provided in accordance with the rules set out in the UCL Funding for Staff Learning and Development Policy.
5. Line manager approval must be obtained before confirming course details or requesting financial assistance.

|  |  |  |  |
| --- | --- | --- | --- |
| **Signed by Employee** |  | **Date** |  |

|  |  |  |
| --- | --- | --- |
| **Faculty/Division/Department to meet full cost** | Y | N |
| **Employee cost in £s (where fees are split)** |  |  |
| **Department cost in £s (where fees are split)** |  |  |
| **Department cost code** |  |  |

I confirm that I support the above application for funding of this training

|  |  |  |  |
| --- | --- | --- | --- |
| **Application Approved by** | | | |
| **Line Manager (Name)** |  | **Date** |  |
| **Dean of Faculty or Department Director (Name)** |  | **Date** |  |

**Appendix 2**

**Employee Learner Agreement (ELA) for learning and professional development**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Personal Details** | | | | |
| **Name** |  | | **Employee No** |  |
| **Job Title** |  | | | |
| **Faculty/Department** | |  | | |
| **Employee start date** | |  | | |
| **Contract type (i.e. FTC)** | |  | **Contract end date (if applicable)** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Course Details** | | | | |
| **Course Name** |  | | | |
| **Course Awarding Body** |  | | | |
| **Training provider** |  | | **Venue** | |
| **Method of study** |  | | | |
| **Course/Module Fees** |  | **Examination fee[[1]](#endnote-1)** | |  |
| **Commences** |  | **Due to Finish[[2]](#endnote-2)** | |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Financial Contribution** | | | | |
| **By UCL** |  | **%** | **£** |  |
| **By Employee (if any)** |  | **%** | **£** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Acceptance & Approval** | | | | |
| **Start Date of Employee Learner Agreement [[3]](#endnote-3)** | |  | | |
| **End Date of Employee Learner Agreement[[4]](#endnote-4)** | |  | | |
| I understand that should I voluntarily:-    • leave UCL’s employment at any time between starting the course and 12 months after its completion;   * leave UCL’s employment without completing my studies where UCL has paid for the course; or   • discontinue my studies  I will be required to repay all or part of the costs paid toward the course/qualification on the following basis: | | | | |
| **Point of departure** | | | **Repayment terms** | |
| If I resign during the course or before the course has commenced but costs have been incurred | | | 100% of that year’s funding | |
| If I leave the University up to 6 months after completing the course | | | 75% of the final year’s University Funding | |
| If I leave the University between 6-12 months after completing the course | | | 50% of the final year’s University Funding | |
| If I leave the University 12 months after completing the course | | | No repayment required | |
| By signing this ELA you confirm your agreement to the terms stated and deductions as set out above.  Please note that UCL will not be able to process any costs towards the course/qualifications until a copy of this ELA has been signed and returned to [od@ucl.ac.uk](mailto:od@ucl.ac.uk) | | | | |
| **Signed by Employee** |  | | **Date** |  |
| **Name of Manager** |  | | | |
| **Signed by Manager** |  | | **Date** |  |

**A copy of this Employee Learner Agreement should be sent to HR Organisational Development for retention on the employee’s file**

1. One attempt at each part will be permitted [↑](#endnote-ref-1)
2. Funding should be granted on an annual basis and an ELA required for each academic year of study [↑](#endnote-ref-2)
3. Commence date of course/training [↑](#endnote-ref-3)
4. 12 months after course completion (i.e. after the last exam, or date last assignment submitted) [↑](#endnote-ref-4)