

**For use on all regulated courses longer than one day**

**Individual Learning Plan 2024/2025  
My Individual Learning Plan (ILP) identifies what I want to achieve on this course and how I will do this.**

**I will discuss any individual requirements with my tutor who will try to ensure that my needs are met.**

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| **Learner Name:** |  |
| **Tutor Name:** |  |
| **Organisation:** |  |
| **Venue and Postcode:** |  |

**Induction Checklist**

As part of my learning programme, my tutor will let me know how to stay safe and who to contact if I have any concerns.

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| **Your learning entitlement** | **I have been given information about:**   * the key roles of the tutor and relevant policies * blended learning and what it will entail * Skills and Employment team contact information * Funding and the Department for Education * compliments/complaints procedures   the Code of Conduct and course ground rules | ✓ |
| **Your Individual Learning Plan** | **I know that to get the best out of my learning programme, I must use my ILP to:**   * summarise the result of my initial assessment * talk to my tutor about accessing additional learning support * monitor progress towards the course targets and course related/essential transferable skills from my starting point * act on tutor feedback about what I need to do to improve | ✓ |
| **Progress,**  **Careers, Learning and IAG/CEG** | **My tutor has told me:**   * how to get impartial information, advice and guidance about my next steps (IAG/CEG), including accessing the National Careers Service * about the options available to me to help with my career aim   Personal Development (PD), including maths, English, digital and other essential transferable skills | ✓ |
| **Health and Safety and Safeguarding** | **I am aware of the following:**   * emergency evacuation procedures, location of fire exits, toilets and refreshment facilities and the organisation’s policy on smoking and other Health and Safety considerations * how to look after my health and wellbeing * the safeguarding policies, and how to disclose any concerns to: Matthew Smith, Safeguarding Lead on 07990 532840, [matthew.smith@cheshirewest.gov.uk](mailto:matthew.smith@cheshirewest.gov.uk)   Ben Watts, Deputy Safeguarding Officer - 07881 500 226,  [benjamin.watts@cheshirewest.gov.uk](mailto:benjamin.watts@cheshirewest.gov.uk), or  Jodie Ronan, Deputy Safeguarding Officer – 07768558858, [jodie.ronan@cheshirewest.gov.uk](mailto:jodie.ronan@cheshirewest.gov.uk)   * the tutor will promote British Values and the PREVENT agenda   the importance of working safely online and not sharing personal information or posting inappropriate content while using the internet and/or Virtual Learning Environments (VLE) | ✓ |
| **Equity, Diversity and Inclusion** | **I know:**   * that equity, diversity and inclusion themes, including the protected characteristics, will be included in the programme * to inform my tutor of any additional needs, health conditions or illness which may affect my wellbeing or attendance * what to do if I feel I am being treated unfairly in any way | ✓ |
| **Course Improvement and Feedback** | **I know that I can:**   * give feedback on my programme * contact Benjamin Watts [benjamin.watts@cheshirewest.gov.uk](mailto:benjamin.watts@cheshirewest.gov.uk) to speak to someone other than my tutor * leave feedback about my course by emailing [skillsandemployment@cheshirewest.gov.uk](mailto:skillsandemployment@cheshirewest.gov.uk), or online via the Ofsted website at [www.ofsted.gov.uk](http://www.ofsted.gov.uk) | ✓ |

**Learner Declaration:** I have received a full induction to my course, and I agree to the code of conduct outlined in the learner handbook. I further agree to fully interact through face-to-face participation in any online sessions.

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| **Learner Signature:** |  | **Date:** |  |

**About My Course**

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| --- | --- | --- | --- | --- | --- |
| **Course Title:** |  | | **Level:** |  | **Regulated** |
| **Start Date:** |  | **Planned End Date:** | |  | |
| **Course Aim:** |  | | | | |

**My Tutor will provide me with the official awarding body learning outcomes and assessment criteria associated with this course**

**Subject Area Confidence**

How confident do I feel about this subject area? 1 = low and 5 = high. I will review this again at the end of the course.

**Transferable Skills and Aptitudes**

**I will be developing the following skills and aptitudes on this course:**

**Skills**

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| --- | --- | --- | --- | --- |
| **Listening** | Receiving, retaining and processing of information and ideas |  | **Staying Positive** | The ability to use tactics and strategies to overcome setbacks and achieve goals |
| **Speaking/Presenting** | Oral transmission of information or ideas |  | **Aiming High** | Setting clear, tangible goals and devising a robust route to achieving them |
| **Problem Solving** | Ability to find a solution to a situation or challenge |  | **Leadership** | Supporting, encouraging and developing other to achieve a shared goal |
| **Creativity** | Use of imagination and the generation of new ideas |  | **Teamwork** | Working cooperatively with others towards achieving a shared goal |

**Aptitudes**

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| **Resilience** | The capacity to recover quickly from difficulties and toughness |  | **Independence** | Doing things for yourself and making own decisions without help of others |
| **Confidence** | Being certain about own abilities, trusting others, plans or the future |  | **Tolerance** | Accepting behaviour and beliefs different from own |

**Summary of Support Needs**

My initial assessment shows what I’m already good at and highlights the areas I need to work on during the course.

**My Strengths and areas for improvement related to this course are:** *(see maths, English and course specific initial assessment results)*

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| **Strengths** | **Areas for Improvement** |
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| **I would like my tutor to give me extra support with my:** | ✓ | **In these areas:** | **I would like to attend a course to help me further** |
| English skills |  |  | **Yes / No** |
| maths skills |  |  | **Yes / No** |
| digital Skills |  |  | **Yes / No** |
| health and wellbeing |  |  | **Yes / No** |
| essential transferable skills and aptitudes |  |  | **Yes / No** |
| other educational needs (if any) |  |  | **Yes / No** |

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| **TUTOR TO COMPLETE AS APPROPRIATE** - summary of referrals made, learning needs and support to be put in place. |
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| **I plan to use this course to further my career in the following way:** |
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| **I will speak to my tutor about setting a SMART personal target to help me achieve this/these aims** |

**Course Progress Review**

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| --- | --- | --- | --- | --- | --- | --- |
| **SMART Personal Targets**  *\*Add your personal targets – what else do you want to gain from this course? Ask your tutor if you need help with SMART target setting.* | **Starting Point 1-5 with**  **1 = low, and 5 = high** | | | **Tutor feedback specific to learner work on this target (dated)** | **Learner comment specific to tutor feedback on this target**  **(dated)** | **Date**  **achieved** |
| **Start Score** | **Mid Score** | **End Score** |
|  |  |  |  |  |  |  |
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| **Awarding Body Assessment Criteria**  *Tutor to insert Awarding Body Assessment Criteria (reference accordingly and add further lines if required).* | **Starting Point 1-5 with**  **1 = low, and 5 = high** | | | **Tutor feedback specific to learner work on this assessment criteria (dated)** | **Learner comment specific to tutor feedback on this assessment criteria**  **(dated)** | **Date**  **achieved** |
| **Start Score**  **(dated)** | **Mid Score (dated - long courses only)** | **End Score (dated)** |
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**Skills and Aptitudes Progress**

**I have practiced the following skills and aptitudes on this course:**

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| --- | --- | --- | --- | --- | --- |
| **Skill** | ✓ | **Skill** | ✓ | **Aptitude** | ✓ |
| Listening |  | Staying Positive |  | Resilience |  |
| Speaking/Presenting |  | Aiming High |  | Confidence |  |
| Problem Solving |  | Leadership |  | Independence |  |
| Creativity |  | Teamwork |  | Tolerance |  |

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| **Some examples of how I have applied these skills/aptitudes are:** (state where and how) |
|  |

How confident do I feel about this subject area now that I have completed my course? 1 = low and 5 = high.

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| **As a result of my discussion with my tutor, I received the following support whilst on my course:** |
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| **This support has helped me to:** |
|  |

**Career Aim**

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| --- | --- |
| **As a result of this course, I feel I have made progress towards my career aim** | **Yes/No** |
| **I would like my tutor to help me to access further advice regarding my career aim and options for the future** | **Yes/No** |
| **Tutor to complete if appropriate** – summary of advice given regarding career aim and options or the future | |
|  | |
| **Further Information and Advice** If you would like further information and advice on taking your next step please speak to your tutor or contact National Careers Service on 0800 100 900 or at <https://nationalcareersservice.direct.gov.uk/> Alternatively, email the Skills and Employment Team at [skillsandemployment@cheshirewest.gov.uk](mailto:skillsandemployment@cheshirewest.gov.uk) | |

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Please scan this QR Code to provide us with some feedback about your course or ask your tutor for a paper-based copy of the feedback form.

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| **Learner signature:** |  | **Tutor signature:** |  |
| **Date:** |  | **Date:** |  |