# Nominate an outstanding learning provider questions

Please note: Questions marked with a \* are compulsory.

## Section 1: Nominator details

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| **First name \*** |  |
| **Surname \*** |  |

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| **Job title \*** |  |
| **Organisation name \*** |  |

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| **Please provide at least one telephone number and email address. We may need to contact you urgently at any time during February or March 2024 by email or telephone if any further information about your nominee is required.** | |
| **Main email address \*** |  |
| **Main telephone number \*** |  |

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| **Are you an employee of the learning provider or project you are nominating?** \* | | | | |
| **Yes** | |  |
| **If Yes, please state your role in relation to the learning provider or project** | | |  |
| **No** | |  |
| **If No, please state your relationship to the learning provider or project** | | |  |

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| **We expect to be notifying nominators of award winners in March 2024. If you will be unavailable for all or a significant part of this time period, please let us know which dates you are unavailable and who we can contact in your absence for initial notification and discussion.** | |
| **Dates unavailable in March:** |  |
| **Alternative contact person name:** |  |
| **Alternative contact person job title:** |  |
| **Alternative contact person email address:** |  |
| **Alternative contact person phone number:** |  |

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| **Publicity arrangements: Award winners often generate local, regional and sometimes national press and media interest. If the learning provider or project you are nominating is selected for an award, we would like to liaise with the organisation’s press / marketing team or other appropriate person for this purpose. Please provide the relevant contact details.** | |
| **Name \*** |  |
| **Job title: \*** |  |
| **Main email address: \*** |  |
| **Main telephone number: \*** |  |

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| **Chief executive or senior member of staff: If the learning provider or project you are nominating is selected as a winner we may invite the chief executive/principal or another member of senior management to attend the awards ceremony. Please provide the relevant contact details.** | |
| **First name: \*** |  |
| **Surname: \*** |  |
| **Job title: \*** |  |
| **Organisation: \*** |  |
| **Main email address: \*** |  |
| **Alternative email address:** |  |
| **Main telephone number: \*** |  |
| **Alternative telephone number:** |  |

## Section 2: About your nominee

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| **Name of learning provider or project\*** |  |

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| **Please provide contact details for the person who has overall responsibility for this learning provision (e.g. manager, organisation CEO):** | |
| **First name: \*** |  |
| **Surname: \*** |  |
| **Main email address: \*** |  |
| **Alternative email address:** |  |
| **Main telephone number: \*** |  |
| **Alternative telephone number:** |  |

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| **How many learners has the learning provision engaged with in the past year? \*** | |
| **0 – 10 learners** |  |
| **11 – 25 learners** |  |
| **26 – 50 learners** |  |
| **51 – 75 learners** |  |
| **76 – 100 learners** |  |
| **More than 100 learners** |  |

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| **What type of organisation leads this learning provision? \*** | | |
| **Local authority – adult education service** | |  |
| **Further education college** | |  |
| **Higher education institution** | |  |
| **Independent training provider** | |  |
| **Libraries, museums, archives or arts** | |  |
| **Offender learning provider** | |  |
| **Armed forces** | |  |
| **Union** | |  |
| **Other post-16 education provider** | |  |
| **Other voluntary sector or charitable organisation** | |  |
| **Other** | |  |
| **If other please state:** |  | |

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| **Where has the learning delivered by the learning provision taken place? Tick all that apply. \*** | | |
| **Local authority – adult education service** | |  |
| **Further education college** | |  |
| **Higher education institution** | |  |
| **Other post-16 education provider** | |  |
| **Libraries/museums/archives/arts** | |  |
| **At a place of employment** | |  |
| **In the community** | |  |
| **In prison** | |  |
| **In the armed forces** | |  |
| **Online** | |  |
| **Other** | |  |
| **If other please state:** |  | |

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| **In what region does the learning take place? Please select all that apply** \* | |
| **East of England** |  |
| **East Midlands** |  |
| **London** |  |
| **North East England** |  |
| **North West England** |  |
| **South East England** |  |
| **South West England** |  |
| **West Midlands** |  |
| **Yorkshire and the Humber** |  |

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| **If the learning took place in the West Midlands, please indicate where in the West Midlands the learning took place? Please select all that apply.** \* | |
| **Birmingham** |  |
| **Coventry** |  |
| **Dudley** |  |
| **Sandwell** |  |
| **Solihull** |  |
| **Walsall** |  |
| **Wolverhampton** |  |
| **Online** |  |

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| **This nomination form is being used for the national Festival of Learning Awards and the West Midlands Adult Learning Awards. Please indicate which awards you are nominating for.** \* | |
| **Both Festival of Learning Awards and West Midlands Adult Learning Awards** |  |
| **West Midlands Adult Learning Awards only** |  |
| **Festival of Learning Awards only** |  |

## Section 3: Nominator statements

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| **Nominator statement Part A\***  **Please tell us about the learning provision you are nominating including:**   * **The aim and objectives of the provision** * **Who the learners are, including the number of learners and outcomes achieved** * **The learning activities that take place (e.g. what, where, how often) including online or blended learning**   Maximum 350 words. |
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| **Nominator statement Part B \***  **What difference has the learning provision made to the learners? Please provide evidence and examples and include data on impact wherever possible.**  Maximum 450 words |
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| **Nominator statement Part C \***  **Why does this learning provision stand out? For example**   * **What is remarkable about this learning provision? What makes it stand out as exceptional?** * **Have there been any wider impacts of the learning provision, for example on the local community?** * **How is this learning provision innovative?**   Maximum 250 words |
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| **Learner statement Part D \***  **Please include at least one testimony from a learner about the difference the learning has made to them and why they think the learning provision deserves an award. Please include the name/s of the learner/s providing the testimony.**  Maximum 200 words |
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## Section 4: Declarations (to be completed by the nominator)

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| Private information and publicity – please read  If your nominee is selected as a winner, we may want to use the information within this form to:   * Write a profile about the provision. * Have professional photos taken. * Have a professional film made where learners will be interviewed about the learning. * Invite them to an awards event where they will be presented with their certificate, have more photos taken and be asked to talk more about the learning.   Award winners often attract interest from local, regional and sometimes national press and media. We may want to share their story, images or interview with them to use in press releases. We may also contact them if there are additional publicity opportunities, such as interviews for radio or TV. If there is any information you have included in this nomination that you do not wish to be made public please let us know below*.*  **If there is any information you have included in this nomination that you do not wish to be made public please let us know here.** |
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| **Would you like to join any of our mailing lists (using the main email address you have provided above) to be kept informed of Learning and Work Institute’s activities?** **Tick all that apply. \*** | |
| **Festival of Learning / Lifelong Learning Week** |  |
| **Monthly L&W newsletter** |  |
| **Events** |  |
| **Labour market analysis** |  |
| **I do not wish to join any of your mailing lists** |  |