

Completion/Withdrawal 18/19

To be completed by the tutor

Learner name:	Course:	Course start date:
----------------------	----------------	---------------------------

Completion Status

Completed <input type="checkbox"/>	Withdrawn <input type="checkbox"/>	Outcome date <input type="text"/>
---------------------------------------	---------------------------------------	--------------------------------------

Achievement Status (If the learner has achieved a regulated aim, please attach the evidence. If the result is not yet available, this should be submitted to the data team as soon as it becomes available)

Achieved <input type="checkbox"/>	Did not achieve <input type="checkbox"/>	Awaiting exam result <input type="checkbox"/>	Outcome date <input type="text"/>
--------------------------------------	---	--	--------------------------------------

Outcome achievement (Non-Regulated and Community Learning courses)

Total course goals set <input type="checkbox"/>	Total course goals achieved <input type="checkbox"/>
Total personal targets set <input type="checkbox"/>	Total personal targets achieved <input type="checkbox"/>

Attendance

Course taught learning hours <input type="checkbox"/>	Actual hours attended <input type="checkbox"/>
--	---

Learner Withdrawal

Last date of attendance:

Why did you withdraw from the course?

<input type="checkbox"/> Learner has transferred to another provider	<input type="checkbox"/> Other personal reasons	<input type="checkbox"/> Reason not known	<input type="checkbox"/> Other
<input type="checkbox"/> Injury/illness	<input type="checkbox"/> Gained employment <small>(please complete the employment outcome form)</small>		
<input type="checkbox"/> Financial reasons			
<input type="checkbox"/> Learner has transferred to a new learning aim with same provider			

Agreed break in learning – Please state reason for break: _____

Destination

Employment		Education	
Have found employment	16 or more hours <input type="checkbox"/>	Have enrolled on a another course	Full time <input type="checkbox"/>
Have become self employed	Less than 16 hours <input type="checkbox"/>	Have enrolled on a University course	Part time <input type="checkbox"/>
Have started to work as a volunteer	<input type="checkbox"/>	Have gained an apprenticeship	<input type="checkbox"/>

Other (please state)

Learner is moving towards/into... (Please circle) _____

- Employment (full time/part time) _____
- Further Learning _____
- Community engagement/volunteering _____

Tutor Signature:	Date:
------------------	-------