**Declaration Form**

PART C

Please read this declaration carefully. By checking each box, you are agreeing to the proceeding statement. Please ensure all parties have signed the form before returning this to us.

Without this form completed in its entirety, we will be unable to process payment.

|  |  |
| --- | --- |
| **Employer** | Click or tap here to enter text. |
| **Apprentice** | Click or tap here to enter text. |
| **Training Provider** | Click or tap here to enter text. |
| **Apprenticeship Start Date** | Click or tap to enter a date. |

**I, the employer, confirm:** *(please check box)*

We have not employed an apprentice within the last 12 months (With the exception of the apprentice named above and up to 2 other new apprentices as part of the R|R|R T&C’s)

We do not pay the apprenticeship levy

The apprentice is still employed 12 weeks from their start date with our organisation

A formal documented & signed review of the apprentices’ progress has been completed by the training provider with both our organisation and the apprentice

My intention is to support the learner until the end of the apprenticeship

I have read the terms & conditions of this incentive and accept these

I understand that Norfolk County Council/Suffolk County Council reserve the right to refuse payment if the information I have provided is not accurate

**Name:**Click or tap here to enter text.

**Signed:** X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** Click or tap to enter a date.

**I, the apprentice, confirm:** *(please check box)*

I am still employed with this organisation 12 weeks on from my start date

A formal documented & signed review of my progress has been completed by my training provider with myself and my employer

My employer has advised me of their intention to support me until the end of the apprenticeship

**Name:**Click or tap here to enter text.

**Signed:** X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** Click or tap to enter a date.

**I, the training provider, confirm:** *(please check box)*

The apprentice remains on programme with this organisation 12 weeks on from their start date

A formal documented & signed review of the apprentices’ progress has been completed by us, with both the employer and apprentice

**Name:**Click or tap here to enter text.

**Signed:** X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** Click or tap to enter a date.