



EDUCATION MAINTENANCE ALLOWANCE LEARNING AGREEMENT – 2011/2012

THIS FORM SHOULD BE DETACHED, COMPLETED BY THE STUDENT AND PASSED TO THE SCHOOL OFFICE

PAYMENT CANNOT COMMENCE UNTIL YOUR SCHOOL HAS RECEIVED AND AUTHORISED THIS DOCUMENT

School Name: _____

Student's Name: _____ SQA No: _____

Date of Birth: _____

Address: _____

_____ Post Code: _____

STUDY PROGRAMME	
SUBJECT	LEVEL
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

CAREER AIMS

This Learning Agreement is to be reviewed at least termly and may be amended if necessary by agreement between the student and the school.

Details of weekly EMA allowance and payment dates are shown in the student's letter of award. Full terms and conditions relating to the payment of allowances, appeals procedures and the recovery of overpayments accompany the student's letter of award and are also available from Customer & Support Services, Education Services, West Lothian Civic Centre, Howden South Road, Livingston, EH54 6FF

telephone (01506) 281952, or email: ["ema@westlothian.gov.uk"](mailto:ema@westlothian.gov.uk)

P.T.O.

DECLARATION

TO BE COMPLETED BY THE STUDENT

I,agree to the terms of this learning agreement.
(student's name in block capitals)

I understand that:-

My study programme (see Options Booklet and personal timetable) forms part of this agreement

I must ensure that all requirements of my study programme are met

I will seek appropriate careers advice before changing my study programme

I must support the school's aims and comply at all times with standards of conduct

I must maintain 100% attendance (other than absences authorised by the school e.g. for genuine medical reasons)

I must notify the school about absences on or before the first day of absence

I understand that if I am late more than twice in one week my EMA will be stopped

EMA may be withheld if the terms of the Learning Agreement are not met or if I do not comply with the terms and conditions of award

Signed _____ Date _____
(student's signature)

PARENT/CARER'S COUNTER SIGNATURE

Signed _____ Date _____
(parent/carer's signature)

TO BE COMPLETED BY THE SCHOOL

I hereby confirm that the student has had the terms of the EMA explained and has agreed to comply with the terms and conditions of award of Education Maintenance Allowances. I, or one of my colleagues will notify West Lothian Council – Education Services should the student fail to meet any of the EMA requirements at any point during the year.

Signed _____ Date _____
Designation _____
(on behalf of the school)

West Lothian Council is a registered Data Controller within the terms of the Data Protection Act 1998. The Council certifies that all personal information is held in compliance with the Act. The personal data supplied on this form will only be used to enable the Council to carry out its duties, obligations and responsibilities under the Education (Scotland) Act and associated legislation. This form will be retained for a period of two years from the end of the academic session to which it relates and will then be destroyed.