

Withdrawn

This publication has been withdrawn.

It is no longer current.

Skills Conditionality Doubt Form

jobcentreplus

This form must be completed to provide information when a participant is dismissed or stops attending a course before its completion.

Department for
Work and Pensions

This form should be accompanied by any paperwork used to inform Jobcentre Plus when claimants stop attending a course.

Keep a copy of this form in the participant's personal file.

Your reply may be shown to the participant or anyone acting on their behalf.
The decision maker may write to you again if further information is required.
Please use black ink and capitals throughout.
Please tick all boxes that apply.

Part 1: Provider Details

Provider Name	
<input type="text"/>	
Provider Reference	Address
<input type="text"/>	<input type="text"/>
Option	
<input type="text"/>	Postcode
	<input type="text"/>

Part 2: Participant Details

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other (Please specify) <input type="text"/>			
Name	<input type="text"/>			
Date of Birth	<input type="text"/>	NI Number	<input type="text"/>	
Telephone	<input type="text"/>	Start Date	<input type="text"/>	
		Leave Date	<input type="text"/>	
Address	<input type="text"/>			
	<input type="text"/>			
	Postcode			
	<input type="text"/>			

Part 3: Reasons for doubt

Please give reasons for doubt (continue on next page if necessary)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Part 3: Reasons for doubt (continued)

Attach additional sheets if necessary

Did the participant give reasons for their actions? Yes No

If 'Yes' please give details:

Was the participant warned prior to dismissal? Yes No

Please state dates where warnings were given and whether they were written or oral.

Dates of Warnings:

Written	<input type="checkbox"/>	Oral	<input type="checkbox"/>
Written	<input type="checkbox"/>	Oral	<input type="checkbox"/>
Written	<input type="checkbox"/>	Oral	<input type="checkbox"/>

- Please attach copies of any written warnings.
- If dismissal was notified in writing please attach a copy of the dismissal letter.

Please give any details of any other incidents of unsatisfactory conduct:

Please use the space below to provide any other information which you think may complete the picture of all events leading up to and including the participant's dismissal.

Part 4: Declaration

I can verify that the information given on this form is correct.

Signature Date

Name

Position Telephone