

# Employer Business Case: Gaps in provision exception

**This form is for employers to notify the Department for Education (DfE) of a gap in the provision of apprenticeship training and for employers to nominate a preferred training provider.**

Important information (please read before completion):

* This is stage one of a two-stage process to identify legitimate gaps in apprenticeship provision. Applications from employers will be verified using information about training providers held by the DfE, including performance information.

Where gap(s) in provision are verified through stage one the preferred training provider will then be invited to apply to the Apprenticeship Provider and Assessment Register (APAR), which is stage two; suitability for entry to the APAR will be assessed at this point. It will take approximately 12 weeks to assess applications, but this may take longer during busy periods. Application guidance can be found on [[gov.uk](https://www.gov.uk/guidance/roatp-application-guidance-digital-may-2021)](https://www.gov.uk/guidance/roatp-application-guidance-digital-may-2021), this provides all application questions asked in the stage two application process.

| **Completion instructions:**  **Part A –** to be completed by the employer and then either:   * returned to DfE if a preferred training provider has not been identified; or * forwarded to the employer’s preferred training provider if one has been identified.   **Part B** – to be completed by the preferred training provider and then returned to the employer who is required to digitally sign and return the completed form to DfE. |
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# *See the* [*DfE Privacy Notice*](https://www.gov.uk/government/publications/privacy-notice-for-key-stage-5-and-adult-education) *for details about how we collect, use, protect and secure your personal information.*

**Part A (to be completed by the requesting employer)**

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| **Declaration:** Please confirm that you have read and completed the steps outlined in the [guidance](https://www.gov.uk/guidance/register-of-apprenticeship-training-providers): | Yes/no (delete as appropriate) |

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| Employer name: |  |
| Companies House number: |  |
| Address: |  |
| Director name: |  |
| Director contact number: |  |
| Director email address: |  |
| Website address: |  |
| How long have you been trading? |  |
| How many employees are in your organisation? |  |
| Where will your apprentices be trained?  *This must be your organisation’s main training location* |  |
| Which sector(s) are you trading in? |  |

**Contact details for this application if not company director:**

|  |  |
| --- | --- |
| Name: |  |
| Job Role: |  |
| Email address: |  |
| **Does the employer consent to being contacted by the DfE to discuss this information?** | Yes/no (delete as appropriate) |

*Non-consent could be detrimental to this business case and your nominated training providers ability to apply to the APAR.*

We can only consider if a legitimate gap in apprenticeship provision exists where you have completed the following steps:

1. Search [Find apprenticeship training](https://www.gov.uk/employers-find-apprenticeship-training) for training providers offering the apprenticeship standard you require. If providers are listed to deliver the specific standard you seek, you must contact each to understand the suitability to your requirements. If none are suitable or if you cannot find appropriate training, use the link to “share your interest” with training providers. The link can be found at the bottom of the search results on [Find apprenticeship training](https://www.gov.uk/employers-find-apprenticeship-training).
2. Allow one calendar month, from when you share your interest, for existing training providers to respond through [Find apprenticeship training](https://www.gov.uk/employers-find-apprenticeship-training).

You should note that in the event no training providers respond you will still be required to provide evidence in your business case that you have exhausted the existing supply base and why all the providers offering the apprenticeship standard you seek on [Find apprenticeship training](https://www.gov.uk/employers-find-apprenticeship-training) aren’t suitable. This includes evidence you have contacted all these providers.

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| What date did you search [Find apprenticeship training](https://www.gov.uk/employers-find-apprenticeship-training)? |  |
| How many providers did you find on[Find apprenticeship training](https://findapprenticeshiptraining.apprenticeships.education.gov.uk/)? |  |
| What date did you share your interest on [Find apprenticeship training](https://findapprenticeshiptraining.apprenticeships.education.gov.uk/)? |  |
| Has it been one or more calendar month since registering your interest on [Find apprenticeship training](https://www.gov.uk/employers-find-apprenticeship-training)? | Yes/no (delete as appropriate) |
| How many training providers responded to your shared interest request on [Find apprenticeship training](https://www.gov.uk/employers-find-apprenticeship-training)? |  |

**Details of training requirement:**

Please provide us with the planned number and dates of apprenticeship starts for this opportunity, covering the next 12-month period for each apprenticeship standard**.**

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| **Apprenticeship standard**  This is the apprenticeship standard as described [here](https://www.instituteforapprenticeships.org/apprenticeship-standards/?). | **Estimated number of starts** | **Planned start dates** |
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| **Location where training is needed** (enter a town, city or postcode) |  |

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| --- | --- |
| **Method of delivery:** (delete as appropriate) | |
| Apprentice workplace: | Yes/no |
| Day release: | Yes/no |
| Block release: | Yes/no |
| National: | Yes/no |

Where you have identified a preferred provider that can deliver to your requirements please indicate if you have contacted them to discuss your opportunity (delete as appropriate):Yes/no

Please list all existing providers offering the apprenticeship standard you seek on Find Apprenticeship Training, including those that responded to your shared interest request, and explain why each does not meet your needs.

Reasons may include (but not limited to) the type of provision on offer; method of delivery, distance, quality of provision and local environment context.

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| **Training provider Name** | **Why the training offer is unsuitable** |
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Please continue on a separate sheet if needed.

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| **Any further information you have used to identify and to support your case:** |  |

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| **DfE Account Manager name (if known):** |  |

# Please ensure all boxes in Part A are completed.

If you have not nominated a training provider, please return this form now to: [APAR.mailbox@education.gov.uk](mailto:APAR.mailbox@education.gov.uk).

If you have nominated a training provider, please forward this form to them for completion of part B prior to submission to the DfE.

**Part B (to be completed by the nominated training provider)**

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| **Legal Name of nominated provider:** |  |
| **Trading Name of nominated provider:** |  |
| **Organisation Type:** | Choose an item. |
| **Proposed Application Route:** | Main/Supporting (delete as appropriate) |
| **Companies House Number:** |  |
| **Has your organisation been on the APAR (previously known as RoATP) before?**  *If yes, please give the removal reason & date* | Yes/no (delete as appropriate) |
| **Relationship with Employer:**  *Any connections through current / former directors or employees?* |  |

**Contact details for nominated provider:**

|  |  |
| --- | --- |
| Name: |  |
| Job Role: |  |
| Email address: |  |
| What is your UK provider reference number (UKPRN)? |  |

The UKPRN is an 8-digit number from the [UK Register of Learning Providers](https://www.ukrlp.co.uk/) (UKRLP).

If you do not have a UKPRN, you’ll need to [register](https://www.ukrlp.co.uk/ukrlp/ukrlp_registration.page_pls_regProviderStep1) with the UKRLP.

We need this number in order to process your business case.

I have read the request from the employer as detailed above and agree to provide training as specified, subject to meeting the requirements of the Apprenticeship Provider and Assessment Register assurance process.

I consent to be contacted by the DfE to discuss this information.

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| **Signature** |  | **Date signed:** |  |

Please return this form to the employer for submission to the DfE. Forms submitted by providers will NOT be accepted.

## Employer submission to DfE

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| Name of requesting employer: |  |
| Contact Name: |  |
| Email address: |  |
| Signature |  |
| Date signed |  |

Employers: Please send the completed form to [APAR.mailbox@education.gov.uk](mailto:APAR.mailbox@education.gov.uk) copying in the nominated provider. Please note incomplete forms or emails without the nominated provider copied in will not be processed.

The email address is for employer business cases only, and no other communications will be responded to.