**WSLP04 LRS Testing Application Form**

**Pre-requisites**

Before you complete and return this form, please ensure that the following pre-requisites are complete. Please tick the boxes to confirm.

|  |  |
| --- | --- |
| **Pre-requisite** | **Tick** |
| 1. You or somebody in your organisation has read the “Get started guide (developing LRS web services) v1”.
 | [ ]  |
| 1. Your application to develop one or more LRS web service products has been successful and accepted by LRS.
 | [ ]  |
| 1. You have read the ‘LRS Testing Instructions Guide’ and understand the process including expectations.
 | [ ]  |

**Notes:**If one or more of the pre-requisites are not complete or met your application to access the test environment will be rejected.

This form should be completed when you wish to book a test period in the Compatibility Environment for ad-hoc or Compatibility testing.

Please complete **ALL** fields marked with an **\*** in Sections 1, 2, 3, 4, & 5 as appropriate and return the completed form by emailing lrs.support@education.gov.uk.

|  |  |
| --- | --- |
| Organisation Name  |  |

**Section 1 – Organisation Details**

Please tick one of the following boxes to indicate the type of organisation you are and to ensure that you are given the correct functionality:

|  |  |
| --- | --- |
| Awarding Organisation | [ ]  |
| Registered LRB (Learner registration body) | [ ]  |
| 3rd Party Software Developer for an LRB | [ ]  |
| 3rd Party Software Developer for an Awarding Organisation   | [ ]  |

### Notes:Please supply the organisation name by which you are known (please ensure that your full name is provided to ensure that the LRS can identify your organisation).

### If you are developing web services:- this must match the organisation name that was added to the developer register when you registered to develop web services - you will need access to the Developer Pack that was mailed to your organisation when your Web Services Interface Application was approved

**Section 2 – Compatibility environment**

Please fill in the details below:

|  |  |  |
| --- | --- | --- |
|  | Period Start Date  | Period Finish Date  |
| **Test Period Requested** |  |  |

### Notes:Please note that you can only book a maximum of 3 months at a time. Should you wish to book more, please complete and resubmit another form when the test period you are requesting has completed or is near to completion.

**Section 3 – Type of testing**

Please tick to indicate the type of testing that you are undertaking:

|  |  |  |
| --- | --- | --- |
|  | Portal | Web Services |
| Creating and Updating ULNs(including batch) *- for LRB development only* | [ ]  | [ ]  |
| Personal Learner Record (PLR) *- for LRB development only* | [ ]  | [ ]  |
| Achievement Management (Create, Update, Withdraw & Reinstate achievements) *- for Awarding Organisation development only* | [ ]  | [ ]  |
| Verifying ULNs *- for LRB or Awarding Organisation development*  | [ ]  | [ ]  |
| Learner Plan *- for Prison Education Framework (PEF) development only* | [ ]  | N/A |

**Section 4 – Passwords**

Please indicate your passwords of choice ensuring they conform to the standard listed below:

|  |
| --- |
| **\*** Organisation Access passwords *(to be completed if this is your first time applying or you require new passwords)* |
| *Organisation Password**(must be exactly 16 characters and consist of alphabetic and numeric characters only)* |  |
| Super User Password*(must be between 6 and 14 characters and consist of alphabetic and numeric characters only)* |  |

**Section 5 – Your Responsibilities**

In consideration of You complying with Your obligations under this Testing Application, the Education and Skills Funding Agency grants You limited access and use of the Learning Records Service (the “**LRS**”) within the Compatibility environment for a designated period. You agree to be bound by this Testing application. If You do not agree to this application, then You will be not given access to use the LRS Compatibility environment and You should not attempt to access the Compatibility environment.

1. Once we receive Your application, we will grant You access/allocate You a test period. We will endeavour to provide You with the dates requested. If this is not available, then we will contact You and offer an alternative date.
2. Once You have been assigned access/a test period we shall provide You with:
	1. A Test Organisation UKPRN
	2. A Super User Login ID for the Compatibility environment
	3. A Digital Certificate for connecting to the Compatibility environment for web service developers only
3. The Education and Skills Funding Agency has taken reasonable care to ensure that the Compatibility environment will be available during Your designated period. However, we accept no responsibility for any errors, misuse, inaccurate or corrupt information or service interruption during the test period.
4. The Test Environment is available between 8am and 6pm, Monday to Friday. The environment is not available after 6pm every evening, or at weekends.
5. The Compatibility environment is refreshed every Friday evening after 5pm. Changes applied during the week will be refreshed back to a baseline.
6. You must make sure that no real learner information is entered into the Compatibility environment.
7. You will not deliberately attempt to corrupt the Compatibility environment or attempt to overload the service with excessive calls or large volumes of data.
8. You will not attempt to access the Compatibility environment outside of Your designated period.
9. The maintenance schedule for the Compatibility environment can be found at: <https://www.gov.uk/government/publications/lrs-maintenance-schedule>

|  |
| --- |
| **By signing below, You are certifying that You accept the Compatibility test environment conditions above and that Your organisation will use the test environment responsibly.**  |
| **Signature:** |  |
| **Name (please print):** |  |
| **E-mail Address:** |  |
| **Telephone No:** |  |
| **Position within organisation:** |  |
| **Date:** |  |

### Notes:You will take responsibility for becoming a developer organisation. Please complete your details as the person who is accepting the conditions on behalf of your organisation.

**Section 6 – Education and Skills Funding Agency Verification of Request (official use only)**

|  |  |
| --- | --- |
| Authorised by: |  |
| Authorised Date: |  |
| Test Org UKPRN: |  |
| RITs Number (Awarding Organisation): |  |
| Test Period Dates Given: |  |
| Additional Verification Notes: |