



SOUTH EAST ASIA SKILLS ENHANCEMENT PROGRAMME

Lloyd's Register Foundation Scholarship Application Form

Application form SEASEP Phase 2

South East Asia Skills Enhancement Programme (SEASEP) is a collaboration between TWI and the Lloyd's Register Foundation (LRF) to upskill people in South and East Asia countries with specific focus on improving safety and trade standards in the work environment.

Under this program, financial assistance is available for Indian citizens wishing to pursue a career in Welding, Non-Destructive Testing (NDT) and Occupational Health and Safety (HSE).

SEASEP offers partial subsidies towards the cost of training. Any remaining course fees should be paid by yourself, your employer, a government schemes (e.g. apprenticeships) or other national or international charities.

In order to be considered eligible for a Lloyd's Register Foundation Scholarship you must be a national of India, agree to participate in marketing, promotion and similar activities in relation to the scholarship and agree to the use of your personal data by TWI to fulfil its legal and contractual obligations.

Applications will be assessed so that those from underrepresented communities are afforded the opportunity to gain employment through upskilling or furthering their career in current employment.

er: _____

n-Binary: ☐

[illegible]

Mr: ☐ Ms: ☐ Miss: ☐ Mrs: ☐ Other: ☐

Male: ☐ Female: ☐ Non-Binary: ☐

D	D	M	M	Y	Y	Y	Y

Mobile: _____ Email: _____

Mobile: _____ Email: _____

SECTION 2: COURSE SELECTION

Which course(s) are you interested in undertaking?

Please pick one of the following combinations			
Note: Attendance on H&S course as a pre-requisite to attending the second course of your choice. The H&S course is online and must be completed before the second course.			
Safety	<input type="checkbox"/>	IOSH Working safely	& IOSH Managing Safely
NDT level 1	<input type="checkbox"/>	IOSH Working safely	& NDT Penetrant Testing Level 1
	<input type="checkbox"/>	IOSH Working safely	& NDT Magnetic Testing Level 1
	<input type="checkbox"/>	IOSH Working safely	& NDT Visual Testing Level 1
	<input type="checkbox"/>	IOSH Working safely	& NDT Ultrasonic Testing Level 1
NDT level 2	<input type="checkbox"/>	IOSH Working safely	& NDT Penetrant Testing Level 2
	<input type="checkbox"/>	IOSH Working safely	& NDT Magnetic Testing Level 2
	<input type="checkbox"/>	IOSH Working safely	& NDT Visual Testing Level 2
	<input type="checkbox"/>	IOSH Working safely	& NDT Ultrasonic Testing Level 2
	<input type="checkbox"/>	IOSH Working safely	& NDT Radiographic Film Interpreter Level 2
3.0	<input type="checkbox"/>	IOSH Working safely	& CSWIP Visual Welding Inspector
Site	<input type="checkbox"/>	IOSH Working safely	& Welder Training
other	<input type="checkbox"/>	IOSH Working safely	& Please name below the training of your choice.

Candidates who hold an international or national certificate in safety may be exempt from 'IOSH Working Safely' training.

To gain exemption, please **attach the copy of your certificate to this enrolment form.**

Why did you select the particular training (selected above)?

Please select up to a maximum of 3 options		
<input type="checkbox"/>	To support my career progression	1
<input type="checkbox"/>	To improve my chances for promotion	2
<input type="checkbox"/>	To increase my flexibility and value in the labor market	3
<input type="checkbox"/>	Because it is affordable	4
<input type="checkbox"/>	Because my employer asked me to	5
<input type="checkbox"/>	Other reason – please specify	6

Why did you decide to access the training through SEASEP?

Please select up to a maximum of 3 options		
<input type="checkbox"/>	Because my company is seeking internationally recognized certification	7
<input type="checkbox"/>	Because it is difficult to access internationally recognized H&S and Inspection training	8
<input type="checkbox"/>	Because the training is being offered locally	9
<input type="checkbox"/>	Because it is affordable because of the subsidy	10
<input type="checkbox"/>	Because my employer wants to support the SEASEP project	11
<input type="checkbox"/>	Other reason – please specify:	12

Was advice given to you on course selection and from where?

Please select up to a maximum of 3 options		
<input type="checkbox"/>	Yes, Employer advised and selected the course for me	13
<input type="checkbox"/>	Yes, I was advised by TWI	14
<input type="checkbox"/>	No, I decided on the course type myself	15
<input type="checkbox"/>	Yes, Friends and/or colleagues helped me to decide	16
<input type="checkbox"/>	Other source of information (please describe below)	17

SECTION 3: EDUCATION, QUALIFICATION AND OCCUPATION RECORD

Please describe your current experience within the subject of your training (if any)

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Please list the education you completed in chronological order, starting from the highest.

Level	Subject	School / College / Awarding body	Results (grades / bands or GPA)	Year Taken

Please list your current qualifications relevant to your current employment (if applicable)

Qualification name	Qualification level (if applicable)	Awarding body	Certificate expiry date (if applicable)
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Are you currently employed?

Employed: <input type="checkbox"/>	Unemployed: <input type="checkbox"/>	Self-employed: <input type="checkbox"/>	Student: <input type="checkbox"/> 20
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Please list your occupational (work) history in chronological order (if applicable)

Positon:	Company Name:	From - To:	Annual Income (CTC in INR):
			<input type="checkbox"/> 0 – 3 Lakhs
			<input type="checkbox"/> 3 – 5 Lakhs
			<input type="checkbox"/> 5 – 10 Lakhs
			<input type="checkbox"/> 0 – 3 Lakhs
			<input type="checkbox"/> 3 – 5 Lakhs
			<input type="checkbox"/> 5 – 10 Lakhs
			<input type="checkbox"/> 0 – 3 Lakhs
			<input type="checkbox"/> 3 – 5 Lakhs
			<input type="checkbox"/> 5 – 10 Lakhs

Please answer the following questions related to your current occupation:

Note: the data provided in this section are collected for the SEASEP project purpose only and will be treated highly confidentially

Following questions are based on workplace hazards.

Please choose the most appropriate answer options.							
	How often do you ?	Never	Once a year	Every 6 months	Every 3 months	Every month	NA
31	Manually push or lift items that are more than 20 kg	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32	Do repetitive movement with your hands for at least 3 hours during the day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33	Perform tasks that you are not familiar with	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34	Interact with chemicals or inflammable substances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35	Work in awkward positions (bend, twist, heavy manual labour)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36	Work at a height that is more than 5 meters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37	Work in high decibel levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38	Stand for more than 3 hours a day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The following questions are based on workplace policies and procedures.

Please choose the most appropriate answer options.

		Strongly disagree	Disagree	Neutral	Agree	Strongly agree
39	Everyone receives compulsory health and safety training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
40	Management is extremely particular about the certification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41	Systems are in place to identify and deal with hazards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42	Workplace health and safety is considered extremely important	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43	There is an active health and safety committee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
44	An incident report is filed with due diligence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45	Health and safety procedures are clearly communicated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Following questions are based on workplace health and safety awareness.

Please choose the most appropriate answer options.

		Strongly disagree	Disagree	Neutral	Agree	Strongly agree
46	I am clear about health and safety regulations at work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47	I have been certified by proper authorities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
48	I know I can refuse to work in an unsafe environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49	If I notice a workplace hazard I am obligated to report it	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50	I help my teammates understand the importance of health and safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tell us, which skills you believe you need to gain / your company believes you need to gain)?

Please select up to a maximum of 4 options (from each column)

	I believe I need		My company believes I need	
Attention to detail	<input type="checkbox"/>	61	<input type="checkbox"/>	71
Knowledge of engineering and technology	<input type="checkbox"/>	62	<input type="checkbox"/>	72
Improve English language ability	<input type="checkbox"/>	63	<input type="checkbox"/>	73
Knowledge of design and drawings	<input type="checkbox"/>	64	<input type="checkbox"/>	74
Ability to use testing equipment	<input type="checkbox"/>	65	<input type="checkbox"/>	75
Ability to follow written instructions	<input type="checkbox"/>	66	<input type="checkbox"/>	76
New and Improved Inspection skills	<input type="checkbox"/>	67	<input type="checkbox"/>	77
Ability to produce better reports	<input type="checkbox"/>	68	<input type="checkbox"/>	78
Better understanding of health and safety	<input type="checkbox"/>	69	<input type="checkbox"/>	79

How did you hear about the SEASEP project?

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SECTION 5: PERSONAL STATEMENTS OF CANDIDATE

Please include why you are applying for this training, and how this training will positively transform your career whilst improving safety in the work place.

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Bursary Eligibility

Please tick the boxes to confirm:

- ☐ I confirm that I am a national of India.
- ☐ I agree to:
- (i) participate in marketing, promotion and similar activities in relation to the scholarship,
 - (ii) the use of my personal data by TWI to fulfil its legal and contractual obligations including the sharing of my personal with third parties for this purpose, and
 - (iii) being contacted by TWI or third parties for or on behalf of TWI to access impact of the training

Cooperation on study-case

We may contact you to ask you for case study on behalf of TWI or Lloyds register. Please could you confirm we have your consent with this?

Yes, I will participate ☐

No, I wish to be excluded ☐

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Candidate's Declarations

- ☐ I do agree that I will participate on the follow up surveys and interviews as required by programme (represented either by TWI and/or Lloyds register foundation).

I confirm that the information given in this form is true, complete and accurate and no information requested or other material information has been omitted. I give my consent to the processing of my data by TWI as provided for herein.

Applicants Signature:

Date

SECTION 6: EMPLOYER'S STATEMENTS (only if you are employed)

Please tell us, what is/are your main motivators to get your personnel upskilled?

Please select up to a maximum of 4 options		
91	To improve staff skills and knowledge	<input type="checkbox"/>
92	To develop staff to take on additional responsibilities	<input type="checkbox"/>
93	To improve the overall safety culture of our workplace	<input type="checkbox"/>
94	To ensure our inspectors are qualified to international standards	<input type="checkbox"/>
95	To strengthen the company portfolio to take on additional contracts	<input type="checkbox"/>
96	To comply with contract requirements for qualification	<input type="checkbox"/>
97	To offer an improved service to our clients	<input type="checkbox"/>
98	To take advantage of affordable training	<input type="checkbox"/>

Employer's Declarations

<input type="checkbox"/>	I do agree that I will participate on the follow up surveys and interviews as required by programme (represented either by TWI and/or Lloyds register).
Employer's Signature:	Date



TWI is collecting this information to help assess and process your Lloyd's Register Foundation Scholarship eligibility and to undertake marketing, legal or contractual obligations concerning the scholarship. The information will be held on file by TWI. This application form is also used to collect data for third parties. Access to the information you provide will be restricted to a limited number of authorised TWI Ltd and third party staff. If unsuccessful your application form will remain on file and be destroyed after one year.

Your information will be processed and stored (by means of a computer database or otherwise) as described above for a duration to fulfil the statutory and recommended retention periods and as required by any contractual obligations of TWI. If you have any concerns about your personal information please contact data.protection@twi.co.uk.

The granting of a Lloyd's Register Foundation Scholarship bursary and the amount of said bursary is at the discretion of TWI. No correspondence relating to the bursary will be entered into. Applications from candidates who do not meet the minimum level of qualification to undertake the course to which a bursary application has been made will be ineligible to receive a bursary. TWI shall have the right, at its sole discretion and at any time, to change or modify the terms and conditions of the Lloyd's Register Foundation Scholarship, such change shall be effective immediately upon posting to its webpage (www.twiindia.com).

TWI shall mean as appropriate: TWI (India) Private Ltd. Old No.85, New No.60, Ellaiamman Colony, Vellala Teynampet, Chennai-600086, India;

Head Office: TWI Ltd, Granta Park, Great Abington, Cambridge CB21 6AL, United Kingdom.

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Discount Code:					
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Reviewed by:		Signature:		Date:	