**GOLDSMITHS’ COMPANY APPRENTICESHIP SCHEME**

**APPLICATION FORM**

**OVERVIEW**

*Please retain for your reference*

The Goldsmiths’ Company Apprenticeship Scheme (GCAS) exists to support young people whilst they train and develop their technical and hand skills in order to become a valuable member of the silversmithing, jewellery or allied trades.

If you are interested in becoming a Goldsmiths’ Company apprentice or taking on an apprentice under the Goldsmiths’ Company Apprenticeship Scheme, please complete the form below to register your interest.

Applications to the GCAS are accepted from October - July each year with applications being considered each August. There are 10 places on the scheme each year and priority is given to applicants who have completed the Foundation Programme at the Goldsmiths’ Centre.

For more information on the GCAS please see our website at:

W: [**www.goldsmiths-centre.org/courses/apprenticeships**](http://www.goldsmiths-centre.org/courses/apprenticeships)

**ELIGIBILITY**

The Goldsmiths’ Company Apprenticeship Scheme accepts applications from:

* Apprentices who have completed 12 months’ work experience and training prior to beginning on the GCAS (this can be made up of EITHER 9 months on the Goldsmiths’ Centre Foundation Programme plus 3 months within a Master’s workshop OR 12 months within a Master’s workshop)
* Have found an employer (Master) willing to take them on as an apprentice for the duration of their training
* Employers, or Masters, must already be a Freeman of the Goldsmiths’ Company
* The workshop should be based in London or the South East

If your situation is different to that described above but you are interested in becoming an apprentice or taking on an apprentice, you may be eligible to apply to for other alternative apprenticeship schemes outside of the Goldsmiths’ Company. Please feel free to contact the GCAS Team to discuss this using the following information.

T: 020 7606 7650

E**:** **professional.training@goldsmiths-centre.org**

*Please complete all sections of the application below:*

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| --- |
| **MASTER (FREEMAN) DETAILS** |
| **FULL NAME:**  |  |
| **COMPANY NAME AND ADDRESS:** **(IF DIFFERENT FROM ABOVE)** |  |
| **WILL YOU BE RESPONSIBLE FOR TRAINING:****(IF NO COMPLETE “TRAINER DETAILS” BELOW)** |  |
| **WORKSHOP NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **DATE OF YOUR FREEDOM FROM THE GOLDSMITHS’ COMPANY:** |  |
| **TRAINER DETAILS (if different to above)** |
| **FULL NAME:**  |  |
| **COMPANY NAME AND ADDRESS:** **(IF DIFFERENT FROM ABOVE)** |  |
| **WORKSHOP NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **NUMBER OF YEARS’ EXPERIENCE IN THE INDUSTRY:** |  |
| **COMPANY DETAILS** |
| **FULL COMPANY NAME:** |  |
| **FULL COMPANY ADDRESS:** |  |
| **COMPANY TELEPHONE NUMBER:** |  |
| **EMAIL ADDRESS:** |  |
| **WEB SITE:** |  |

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| **WORKSHOP DETAILS** |
| **NUMBER OF CRAFTSPEOPLE IN WORKSHOP:** |  |
| **DIMENSIONS OF WORKSHOP IN METRES:** |  |
| **PROPOSED APPRENTICESHIP SPECIALISM:** **(I.E. DIAMOND MOUNTER, SILVERSMITH, ENGRAVER ETC.)** |  |
| **HAS THE PROPOSED APPRENTICE COMPLETED A FOUNDATION PROGRAMME OR ASSOCIATED TRAINING WHICH MAY RESULT IN A SHORTER APPRENTICESHIP TERM? IF SO, WHAT\*:** |  |
| **DECLARATION:** Your privacy is important to us. At the Goldsmiths’ Centre, we are committed to protecting the privacy and security of our community and applicants. We collect information about you in order to fulfil our public task and provide you with the service/s you have requested. By being accepted on the GCAS, we will also be sharing your data with the Goldsmiths’ Company, the Guildhall and City & Guilds to register for your Apprenticeship and qualification. This information is requested in accordance with the terms of the Data Protection Act 2018 and will not be disclosed to any third parties unless specified above. |

\*Apprentices who have completed the Goldsmiths’ Centre Foundation Programme are entitled to a reduced term of apprenticeship. Please contact the GCAS Team for further information.

So that we can monitor pay trends in the industry we would be grateful if you could complete the table below indicating what you intend to pay your apprentice over their time with you. This information will of course be treated as confidential.

|  |
| --- |
| **APPRENTICE PAYMENT** |
| **1ST YEAR PER ANNUM** | **2ND YEAR PER ANNUM** | **3RD YEAR PER ANNUM** | **4TH YEAR PER ANNUM** | **5TH YEAR PER ANNUM** |
| **£**(ALREADY COMPLETE) | **£** | **£** | **£** | **£** |

**MASTERS SIGNATURE:**

**DATE:**

|  |
| --- |
| **PROPOSED APPRENTICE – PERSONAL DETAILS** |
| **NAME IN FULL:**  |  |
| **DATE OF BIRTH:** |  |
| **HOME ADDRESS:**  |  |
| **HOME TELEPHONE NUMBER:** |  |
| **MOBILE NUMBER:** |  |
| **EMAIL ADDRESS:** |  |
| **PROPOSED APPRENTICE – EDUCATIONAL INFORMATION** |
| **LAST SCHOOL / COLLEGES ATTENDED:** |  |
| **DATES ATTENDED:** |  |
| **QUALIFICATIONS ATTAINED:** | GSCE Maths result:GSCE English result:GSCE ICT result:Other: |
| **WHAT SKILLS OR ABILITIES DO YOU HAVE THAT COULD BE USEFUL TO THIS APPRENTICESHIP:** |  |
| **WHY DO YOU WANT TO BE CONSIDERED FOR THE GOLDSMITHS’ COMPANY APPRENTICESHIP SCHEME (IN 100 WORDS MAX):** |  |

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| --- |
| **PROPOSED APPRENTICE – PARENT / GUARDIAN INFORMATION** |
| **TO BE COMPLETED BY THE PARENT / GUARDIAN (DELETE AS APPROPRIATE) WHO WILL TAKE PART IN THE APPRENTICE’S BINDING CEREMONY** |
| **NAME IN FULL:**  |  |
| **HOME ADDRESS:**  |  |
| **HOME TELEPHONE NUMBER:** |  |
|  **MOBILE NUMBER:** |  |
| **WORK NUMBER:** |  |
| **OCCUPATION WHEN APPRENTICE WAS BORN:** |  |
| **DECLARATION:** Your privacy is important to us. At the Goldsmiths’ Centre, we are committed to protecting the privacy and security of our community and applicants. We collect information about you in order to fulfil our public task and provide you with the service/s you have requested. By being accepted on the GCAS, we will also be sharing your data with the Goldsmiths’ Company, the Guildhall and City & Guilds to register for your Apprenticeship and qualification. This information is requested in accordance with the terms of the Data Protection Act 2018 and will not be disclosed to any third parties unless specified above. |

**APPRENTICE SIGNATURE: DATE:**

Please complete this form fully, and send it to the address below, together with the following items:

* Proposed apprentice’s **full Birth Certificate** (this is A4 in size and shows the place of birth and parent’s occupations)
* Proposed Master’s **City of London** Freedom Certificate (this is a long, thin certificate and is not the Goldsmiths’ Company Freedom Certificate)
* 2 images of proposed apprentice’s work completed during their first year within the workshop

**REF: Goldsmiths’ Company Apprenticeship Scheme**

Please attach passport

photo of apprentice here.

**The Goldsmiths’ Centre**

**42 Britton Street**

**London**

**EC1M 5AD**

**T: 020 7606 7650**

**E:** **professional.training@goldsmiths-centre.org**