

Workforce Development Fund

Claim Cover Sheet 2020/2021



| | |
|--------------------------|--|
| Organisation Name | |
| Contact Name | |
| Telephone Number | |
| E-mail Address | |

Checklist – Please ensure you have completed the steps below, as specified in the ‘Welcome to Workforce Development Fund 2020/21’ document in order for your claim to be successful and dealt with quickly.

- Fully updated/completed your Adult Social Care - Workforce Data Set, ASC-WDS (previously known as NMDS-SC) and checked it is sufficiently completed to ensure your organisation is eligible to claim WDF
- Enclosed copies of the certificate the candidate(s) completed, which should be dated between 1 January 2020 and 31 March 2021
- Registration number **and** Unique Learner Number (ULN) clearly shown on the Unit Summary Sheet(s) and/or Certificate(s)

Summary of claim – For Office Use Only

| | |
|---|--|
| Total Number of Qualifications Claimed | |
|---|--|

| | | | | |
|--|---------------------|--------------------------|--------------------|---------------|
| Claim received: | Documents complete: | Submitted to SfC: | Invoice requested: | Invoice Paid: |
| | | | | |
| Additional evidence required and received: | | | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | | |
| <input type="checkbox"/> | | <input type="checkbox"/> | | |
| ASC WDS Completed: | | | | |
| Claim Ref. No. | | | | |