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## Learning Support Agreement form

### What is a Learning Support Agreement

A Learning Support Agreement (LSA) is a document jointly produced by you and our Learning Support Coordinator. It's how you can tell us about any disabilities, access needs or other circumstances and helps us to consider any reasonable adjustments that may be needed to support you during your studies with us.

Reasonable adjustments can be helpful if you have any learning differences, a mental health condition, disability, caring responsibilities, long or short-term health conditions, and other life situations that could impact your ability to study.

Please refer to our [Learning Support Agreement Guidelines](#).

### What happens when you complete a Learning Support Agreement?

Once you have completed the Learning Support Agreement with the Learning Support Coordinator, we'll talk to you about 'consent to share'. Whilst you can choose to restrict who the LSA is shared with, we encourage you to consent for us to share your LSA with your course director and course tutors so that they can provide you with suitable support and so that they are aware of the reasonable adjustments. You may choose not to restrict who your LSA is shared with, which means we may share your LSA with other relevant colleagues, such as members of our admin team as well as Fire Marshalls and Health and Safety leads.

### What if you're unhappy with the support we can provide

If you're dissatisfied with the outcome of your LSA, we would suggest that you initially speak with our Learning Support Coordinator. If you continue to remain dissatisfied with the outcome of your LSA, you should refer to our Student Complaints Policy.

### Information and advice

For further and more specific information around about learning support, please contact Polly Mortimer, Learning Support Coordinator

Email: [pollymortimer@bpf-psychotherapy.org.uk](mailto:pollymortimer@bpf-psychotherapy.org.uk)

Voicemail: 0203 833 8965

Working days : Wednesday and Thursday 11-6

## Learning Support Agreement

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**Section 1: Your details**

Title	
First Name	
Surname	
Address & postcode	
Telephone contact number	
Email address	

**Section 2: Your studies**

Name of course	
Year of study	

**Section 3: Your learning support needs**

Type of learning need disability, issue which may need support. These may be temporary or permanent.

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**Section 4: Evidence****Section 5: Reasonable adjustments**

Details of how the bpf can meet your learning support needs, including awareness and adjustments.

<b>Section 5: Consent to share</b>	
I consent that my LSA can be shared with all relevant staff	Yes / No
I consent that my LSA can only be shared with (please list). For example, this may be with the Course Director, Course Tutors, Training Manager/Administrator, Health & Safety Lead	Yes / No

<b>Section 6: Declaration</b>
I agree with the reasonable adjustments, and understand that my LSA will be reviewed annually, or sooner should my circumstances change.
Student Signature
Date
Learning Support Coordinator Signature
Date
Review date

<b>Additional Information</b>