

**Pathway 1 / Pathway 2 Project (delete as appropriate) Form to Capture Underrepresented Groups Participant Information**

**This form can be completed as evidence for Taith participants from underrepresented groups, in cases where other forms of evidence are unavailable.**

**To be completed by the Participant/ Parent/ Carer**

**Participant name\***

***\*This information would be redacted by the Grant Recipient organisation if the form is included as part of a Taith desktop or onsite audit.***

This form can be completed by the participant or their parent/ carer, if appropriate. If this form is to be completed by a parent/ carer on behalf of the participant, please provide your name and the reason why you are completing this form.

Taith is committed to making international exchange more inclusive and accessible, and focuses on supporting people previously underrepresented in international exchange to access opportunities, including:

* people from disadvantaged backgrounds;
* people from ethnic minority backgrounds;
* Disabled people;
* people with additional learning needs.

**Disadvantaged participants**

Participants who meet one or more of the following criteria will be classified as disadvantaged and will be eligible for additional funding for travel related costs to support their involvement in a physical mobility:

* Learners, young people and staff with an annual household income of £26,225 or less.
* Learners, young people and staff receiving Universal Credit or income-related benefits in their own name.
* Learners and young people who are eligible for means tested free school meals.
* Learners and young people who are care experienced. This refers to anyone who has been or is currently in care or from a looked after background at any stage of their life, no matter how short, including adopted children who were previously looked after or those who access the Care Experienced Bursary in other parts of the UK.
* Learners, young people and staff who have caring responsibilities for a disabled child, or an adult who, due to illness, disability, mental health problems or addiction, cannot cope
* Learners, young people and staff who are refugees and asylum seekers.

**I confirm that I/ the participant meet(s) one or more of the criteria above**

**I confirm that I/ the participant do(es) not meet any of the criteria above**

**Participants from ethnic minority backgrounds**

Please tick the box that applies to your/ the participant’s ethnic background.

### **Asian or Asian British**

* Indian
* Pakistani
* Bangladeshi
* Chinese
* Any other Asian background

### **Black, Black British, Caribbean or African**

* Caribbean
* African
* Any other Black, Black British, or Caribbean background

### **Mixed or multiple ethnic groups**

* White and Black Caribbean
* White and Black African
* White and Asian
* Any other Mixed or multiple ethnic background

### **White**

* English, Welsh, Scottish, Northern Irish or British
* Irish
* Gypsy or Irish Traveller
* Roma
* Any other White background

### **Other ethnic group**

* Arab
* Any other ethnic group

**Disabled participants**

Participants who are Disabled are eligible for additional funding to support their involvement in a mobility (physical or virtual).

A Disabled person is defined as someone with a physical or mental impairment that has a ‘substantial’ and ‘long-term’ effect on their ability to do normal daily activities (Equality Act 2010).

**I confirm that I/ the participant meet(s) the definition as outlined above and in the Equality Act 2010**

**I confirm that I/ the participant do(es) not meet the definition as outlined above or in the Equality Act 2010**

**Participants with Additional Learning Needs (ALN)**

The definition of [ALN](https://www.gov.wales/additional-learning-needs-transformation-programme-frequently-asked-questions-html#:~:text=The%20additional%20learning%20needs%20(ALN,%2For%20disabilities%20(LDD).) is: as defined by the Additional Learning Needs and Education Tribunal (Wales) Act 2018 (the ALN Act) and the Additional Learning Needs Code for Wales 2021 (the ALN Code)

**I confirm that I/ the participant meet(s) the criteria for ALN as defined by the ALN Act and the ALN Code**

**I confirm that I/ the participant do(es) not meet the criteria for ALN as defined by the ALN Act or the ALN Code**

**Name\***

**Signature\***

**Date**

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**Participant Identifier number\*\***

***\*\*To be completed by the Grant Recipient organisation.***