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**CHANGE OF CIRCUMSTANCES FORM**

**DEGREE APPRENTICESHIP**

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| --- | --- |
| **Apprentice Name** |  |
| **Apprentice ULN** |  |
| **Employer** |  |
| **UoL Team Member** |  |
| **Contact Type** |  |
| **Date** |  |

|  |
| --- |
| **Change of Circumstance Details** |
|  |
| **Evidence Provided***(Please detail evidence provided & insert copy below or type N/A if not applicable)* |
|  |

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| --- |
| **Signatures** |
|  | **NAME** | **SIGNATURE** | **DATE** |
| University of Liverpool Team Member |  |  |  |
| Apprentice |  |  |  |
| Employer*(if required)* |  |  |  |