Add logo/headed paper

Add ESF Programme name

Add sender’s full name

Add sender’s organisation name

Add sender’s department/team

Add sender’s position

Add sender’s full address

Add sender’s contact details

Add recipient’s full name,

Add recipient’s position

Add recipient’s organisation name

Add recipient’s department/team,

Add recipient’s full address

Add date

Re: Eligibility verification request for: Add name of participant and their address

Dear Add recipient’s name

Add partner name has been awarded funding by [**London Councils**](http://www.londoncouncils.gov.uk/services/grants/esf) to deliver a European Social Fund programme (ESF).

The Add ESF Programme name project aims to: Project summary outlining the participant’s journey while on the programme from start to end.

Participants enrolling on the programme need to meet specific eligibility criteria, which also includes third party verification on behalf of the participant.

Add participants name has been registered on the programme since Add enrolment date and informed us that Add name of organisation and staff member has been assisting him/her and has an understanding of their current circumstances.

We would be grateful if you could complete the third party verification table overleaf to confirm Add participants name eligibility to enrol on the Add name of ESF programme.

Please feel free to contact me should you have any queries and or require any further information.

Kind regards

Add sender’s name

Add sender’s position

Add direct line and email address

**ESF Programme 2014-2020 - Third party ESF eligibility verification form**

|  |  |
| --- | --- |
| Participant Name |  |
| Participant Address |  |
|  |
| Postcode |
| Participant employment status | Employed including self employed  Unemployed (is out of work, immediately available for work  and actively seeking work or officially unemployed)  Economically inactive (not employed or unemployed and is not  available or seeking work) Please refer to guidance overleaf. |
| Time the above-named participant has been without work | 0-6months  6-12 months  12-24 months  2-3 years  3 years or more |
| **I confirm that the name, address and employment status information above for Add Participant Name is correct.** | |
| Name |  |
| Signature (wet ink) |  |
| Date of Signature (wet ink) |  |
| Position |  |
| Organisation Name |  |
| Telephone Number |  |
| Email Address |  |
| Company stamp  *Signatory to sign and date the company stamp* |  |

**What do we mean by economically inactive?**

A person may be economically inactive if they:

* Are not working and not available to start work immediately
* Are out of work, but are not available to start tomorrow should a job become available
* Have particular issues with finding work, preparing for work or holding down a job.

**Who is economically inactive?**

* Persons who have retired early
* Those with particular caring responsibilities (children)
* Discharging care responsibilities
* Lone parents
* Long term sick
* Temporarily sick
* Looking after the home
* Looking after family