

Gateway Ready Meeting Form

Early Years Educator Level 3

GATEWAY READY MEETING					
Apprentice Name					
ULN		Date of Birth			
Employer/Setting Name (Company Name)					
Duration					
PLANNED Learning Start Date:		PLANNED Learning End Date:		PLANNED duration of learning (in weeks)	
ACTUAL learning start date		ACTUAL Learning End Date:		ACTUAL duration of learning (in weeks)	
Off the Job Training Hours (OTJT)					
Contracted hours per week		Contracted weeks per year (F/T = 52, TTO = 38/39)		Minimum Off the Job Training Hours (OTJT hours)	
PLANNED OTJT hours		ACTUAL OTJT hours		Variation from original planned OTJT hours	
Has the apprentice completed all the required elements of learning and OTJT logs more than 28 DAYS BEFORE the agreed Learning Planned End Date?				Yes	
				No	
IF Yes, then please complete the Programme Early Completion Summary Statement below with the learner and employer:					

Reason for the variation to duration or OTJT hours

Please explain how the apprentice has been able to complete their programme earlier than planned. Include details of the ways in which this has been made possible

Confirmation

It is confirmed that the off-the-job training hours actually delivered was at least the minimum required over the actual duration of the programme

It is confirmed that the apprenticeship met the minimum duration threshold. (Start date on or before 31/07/2025 = 12 months minimum duration practical period. Start date on or after 01/08/2025 = 8 months minimum duration practical period)

Pre-requisite requirement of the standard	Achieved (Yes/No) If Functional Skills has been opted out tick N/A	Evidence of achievement is held	Evidence of assessment is held
Early Years Educator Level 3	Yes No NA		
Level 3 Diploma for Children and Young Peoples Workforce (Early Years Educator)	Yes No NA		
Maths Level 2	Yes No NA		
English Level 2	Yes No NA		

Pre-requisite requirement of the standard		Achieved (Yes/No) If Functional Skills has been opted out tick N/A	Evidence of achievement is held	Evidence of assessment is held	
Level 3 Award in Paediatric First Aid		Yes No NA			
Exemption evidence uploaded to EPA PRO		Yes No NA			
Portfolio of evidence & mapping sheet		Yes No NA			
Direct Observation Session Plan - Completed with Feedback		Yes No NA			
Risk Assessment - Risk Assessment linked to observation session plan completed		Yes No NA			
Where functional skills is a mandatory requirement (age 16-18 at start), evidence of achievement must be held. Where functional skills is optional (age 19+ at start), evidence of attempting the assessments must be held.					
Apprentice has completed a mock Professional Discussion	Yes No	Apprentice has achieved all the criteria for the standard	Yes No	Is the Apprentice ready for EPA	Yes No

Employer and provider declaration

I confirm that the gateway meeting has been carried out to confirm that the apprentice:

1. Has achieved all the End-Point Assessment Gateway/Gateway to completion requirements as detailed in the Assessment Plan and Occupational Brief. We are satisfied that the EPA Gateway/Gateway to completion has been achieved in accordance with the assessment plan for this standard and agree that the apprentice has the knowledge, skills and behaviours required by the apprenticeship standard and is ready for EPA/apprenticeship assessment.
2. Has been employed for the duration of their apprenticeship, and, to my knowledge at this time, they will continue to be employed up to the end of the EPA/apprenticeship assessment period.
3. Has completed the minimum duration required on programme (either 12m or 8m, as detailed above) before this meeting.

Employer		
Name	Signature	Meeting Date

Provider		
Name	Signature	Meeting Date

Apprentice declaration

1. I confirm that I have gone through a Gateway process and agree that I am ready for EPA/ apprenticeship assessment.
2. I confirm that I have attributed to the work within my portfolio. Ascribing all work documents, products, comments and explanations to my own practice and/or performance.
3. I consent that the EPAO can apply for my Apprenticeship Certificate on my behalf. I understand that the Apprenticeship Certificate, showing my overall grade, will be posted directly to my employer at the following address:

4. I confirm that I would like Parenta to post out my Diploma/English Functional Skills/Maths Functional Skills certificates (IF APPLICABLE) to the following address:

My employer address as stated above OR My home address/alternative address as given in the box below OR NOT APPLICABLE as no Diploma or FS completed

Apprentice		
Name	Signature	Meeting Date

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