**Inclusive Skills Statement of Support Needs**

Competitor name:

Competitor organisation:

Competition:

Please specify the competitor’s Additional Learning Needs:

Please provide detail on any measures that should be taken to support the competitors Additional Learning Needs in this competition:

Name of supporting staff:

*This should be the member of staff attending on the competition day with the competition entrant.*

Email address of supporting staff:

Telephone number of supporting staff:

**Datganiad o Anghenion Cymorth Sgiliau Cynhwysol**

Enw’r cystadleuydd:

Sefydliad y cystadleuydd:

Cystadleuaeth:

Nodwch Anghenion Dysgu Ychwanegol y cystadleuydd:

Rhowch fanylion am unrhyw fesurau y dylid eu cymryd i gefnogi'r Anghenion Dysgu Ychwanegol y cystadleuydd yn y gystadleuaeth hon:

Enw'r staff cefnogol:

*Dylai hwn fod yr aelod staff sy'n mynychu ar ddiwrnod y gystadleuaeth gydag ymgeisydd y gystadleuaeth.*

Cyfeiriad e-bost y staff cefnogol:

Rhif ffôn y staff cefnogol: