

## Appendix 6: Cancelled or Delayed/Curtailed Access Form

London Underground					
Frustrated Access (Cancelled / Delayed / Curtailed) Form					FAC-001 v1
Directorate:			Upgrade / Asset Group:		
Project / Work Title:			Project Id / Work Order / Job Ref:		
Line: _____		Unique Ref.: _____			
Access Affected: (tick one)		Cancelled: <input type="checkbox"/>		Delayed / Curtailed: <input type="checkbox"/>	
Date: (24H start)		Day: ____/____/____		Night: (start) ____ - (end) ____/____/____	
Access Authority Details: (must be valid)					
Booking Ref. (1):		PICER Ref (copy required): _____			
Booking Ref. (2):		Access Type: TRACK / STATION / OTHER (circle as applicable)			
<small>All details Mandatory</small>					
Access Location (or Code):			Work Location or Code (+ SB/NB/EB/WB):		
Station Supervisor Name:			Track Current Sections Booked Out (ref required):		
Work to be done (brief details)					
Time Booked on Station:	Time Booked on with TAC:	Call Back Time given by TAC:		TAC Ref. No:	
Planned Start time:	Actual Start time:	Planned finish time:	Actual finish time:	Total Shift or Time Lost:	
<b>Reporters Details:</b> (mandatory)					
Name:		Company		Contact No. Email	
<b>LU Accountable Manager Details:</b>					
Name:		Directorate / delivery Group		Contact No. Email	
<b>Contractors / Sub-Contractors affected:</b> (mandatory)					
Contractor	Ops in work Party (no.)	Contractor	Ops in work Party (no.)	Contractor	Ops in work Party (no.)
<b>Cause of Lost Time / Shift</b> (mandatory)					
Engineers Train Y/N	Train ref. no.	Was train published in ENLA?	If so, which no?	Was Train published in Eng Notice?	If so, which no?
	Reason for late running (if known)				
Passenger Train Y/N	Train ref. no.	Line	Direction (circle one) SB / NB / EB / WB	Destination	
	Reason for late running (if known)				
Other Contractor	<input type="checkbox"/>	Name			
LU Supervisor	<input type="checkbox"/>	Name			
Late Book on TAC	<input type="checkbox"/>	Details			
Early call back TAC	<input type="checkbox"/>				
Other	<input type="checkbox"/>				
Signature of station supervisor				Was further investigation completed by DOE / DOME? Y / N	

This form must be faxed to XXXXX or emailed to XXXX

**Schedule 14**  
**Strategic Labour Needs and Training**  
**NOT USED**

**APPENDIX 1 TO SCHEDULE 14**

NOT USED

**APPENDIX 2 TO SCHEDULE 14**

NOT USED

**APPENDIX 3 TO SCHEDULE 14**

**NOT USED**

**Appendix 4 to SCHEDULE 14  
Periodic SLNT Monitoring Report Template**

**SLNT Monitoring Form**

Organisation: \_\_\_\_\_

Date: \_\_\_\_\_

TfL Period: \_\_\_\_\_

SLNT Category	TfL Priority	Numbers				Additional Detail/ Information
		Annual Target	Annual Forecast	Outputs this Month	Outputs To Date	
<b>Worklessness</b>						
- Apprentices (FTE)	Y					
- Job Starts (FTE)	Y					
- Placement Positions (Nos)	Y					
<b>New Entrants</b>						
- Apprentices (FTE)	Y					
- Job Starts (FTE)						
- Graduates (FTE)						
<b>Trainee's</b>						
- Placement Positions (Nos)						
- Taster Positions (Nos)						
<b>Current Workforce</b>						
- Adult Apprentices (FTE)	Y					
- Workforce Skills (Days)						
<b>Educational Activities (Days)</b>						

<p><b>Output Summary</b></p> <p><b>Highlights</b></p>  <p><b>Issues/ Concerns</b></p>  
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