



COURSE DETAILS

Title of Course to be studied

Month of Entry January April September

Qualification to be obtained: BA/BSc/FdA/FdSc/MA/MSc

Level of Entry Year 1 Year 2 Year 3

How do you intend to study the course?

Full Time Part Time

Do you wish to be considered for Advanced Standing based on prior learning and/or experience?
(If yes, please attach copies of relevant qualifications and/or transcripts you would like to be taken into consideration and provide details in your personal statement)

Yes No

PERSONAL DETAILS

Title (Mr/Miss/Mrs/Ms)

Gender

M F

Forenames

Surname (Family Name)

Previous Surname (if applicable)

Permanent/Home Address

Telephone Number (Daytime)

Telephone Number (Evening)

Mobile Number

Postcode

Email Address

Date of Birth

Country of Birth

Nationality

Have you been ordinarily resident in the UK for the last three years?

Yes No

ACADEMIC RECORD

Qualifications achieved from age 16 - For Undergraduate Courses

Qualifications achieved from age 18 - For Postgraduate Courses

(Please enclose a copy of transcripts/certificates)

Name of School/College/University	Date From	Date To	Qualifications Achieved (ie GCSE/A Level/HNC/ Access/Diploma/Degree)	Subjects/Title of Award	Grade/Result

ACADEMIC RECORD Qualifications/Courses still being undertaken

Name of School/College/University	Date to be Taken	Qualification and Level	Subject

EMPLOYMENT RECORD (including Voluntary Work and Work Experience in Schools)

Date From	Date To	Employer	Position Held

PERSONAL STATEMENT

Please provide, on a separate sheet of paper, a Personal Statement telling us more about your motivation for applying for this course, your work experience (if relevant) and your general interests related to the course of study.

REFERENCES

Please supply one academic reference for an undergraduate course and two academic references for a postgraduate course using the University Reference Form(s). For all professional courses, except Teacher Education, we need two references.

PAYMENT OF FEES

Who will be paying your fees? Yourself Sponsor Local Education Authority

If Sponsor or Local Education Authority, please provide details.

DISABILITY OR SPECIAL NEED

Do you have a disability or any special need for which you may require support or extra resources?

Yes

No

If yes, please provide full details in an accompanying letter.

CRIMINAL CONVICTIONS

Have you been convicted of a criminal offence, either in the UK or in any other country?

Yes

No

If yes, please provide full details in an accompanying letter.

N.B. There is no need to declare 'spent' convictions or minor motoring offences. Applicants for courses leading to Qualified Teacher Status, Social Work, Counselling Courses and Childhood Studies will, however, be subject to the Criminal Records Bureau Enhanced Disclosure checks, if successful at interview.

DECLARATION

I certify that the foregoing information is correct and I understand that any false or misleading statement made on this form, or failure to disclose information relevant to this application may result in my application being rejected/registration being terminated and/or may lead to legal proceedings. I agree to supply any information that I am asked for in relation to this application. I understand that this information will be treated in confidence. I understand that the University of Chichester's administration of applications is registered under the Data Protection Act and that personal information which I have declared will be stored on computer and may be verified against other information which I have passed on to other public bodies.

Signature

Date

Please return this completed form, together with your Personal Statement and References, to:
Admissions Department, University of Chichester, Bishop Otter Campus, College Lane
Chichester, West Sussex PO19 6PE, United Kingdom or fax to +44 (0)1243 816080