APPLICATION FORM 2022/2023 Please complete <u>all</u> sections clearly in capital letters to ensure we can process your application efficiently

tionality



Course Title/Subject:					
Your Personal Details					
Official name as per Birth Certificate/Passport Surname:	Home Address:				
First name(s) in full:					
Preferred name: Age on 31/08/2022 Date of Birth: Gender: Male Female Gender Identify: Male Female Gender Neutral Gender Fluid Transgender	Postcode: Home Telephone number: Mobile Telephone number: National Insurance Number:				
Email address: (your email address will be the College's main way of contacting you)					
Do you have an EHCP? Yes No Do you consider yourself to have a learning difficulty, disability or medical need? Yes No Prefer not to say If yes, please give details:					
Your Nationality Your Ethnicity					
Do you have any unspent criminal convictions? Yes No This information will be discussed with you in strictest confidence					
People to contact in an emergency or for sharing information on progress and attendance					
Emergency Contact 1: Please tick as appropriate: Emergency only Emergency & Progression only Emergency & Progression	Emergency Contact 2: Please tick as appropriate: Emergency only Emergency & Progression only Emergency & Progression				
Full Name: Emergency & Progression	Full Name: Emergency & Progression				
Relationship to student: Home Address:	Relationship to student:				
rome radiess.	Home Address:				
Postcode:	Postcode:				
Home Telephone number:	Home Telephone number:				
Mobile Telephone number:	Mobile Telephone number:				
Email:					
	Email:				
Your Prior/Current Education	Email:				
Your Prior/Current Education Which School/College did you last attend?	Email:				
	Email:				
Which School/College did you last attend?					

Continued: Date	Subject		Level	Grade
Existing Qualification	ations— Please state subjects/courses and grade	es achieved:	Level	Grade
Your Additional	Information:			
What is your career (Please provide deta				
(Flease provide deta	iis)			
Referee details:				
Full Name:		Education	Employment	Oth
Telephone Number:		Address:		
	College is compliant with the General Data Protection I o certain Government Agencies as requested such as th ork and Pensions.			
The information you	ou supply is used by the Education and Skills Funding A nique Learner Number (ULN) and to create your Perso	gency, an executive agend nal Learning Record, as pa	ry of the Department fourt of the functions of the	or Education (DfE), to ne DfE.
how long we retain Education and Skil	ation about the use of and access to your personal data n your data, and how to change your consent to being Is Funding Agency: https://www.gov.uk/govenment/ ttps://www.gov.uk/government/publications/Irs-pri	contacted please visit: publications/esfa-privacy-		e share your data,
This will only take	college is collecting your data for education, training, eplace where the law allows it and the sharing is in com thority (or agents acting on its behalf) may contact yo	pliance with data protect	ion compliance. The En	glish European Social
I confirm I have be (https://www.iwco contained in this fo shared with third p	en made aware of and agree to the College Data Prote ollege.ac.uk/information/policies-legal/#information-sorm, or other data, which the College may obtain from parties for education, training, employment and well-band any sharing is in compliance with the relevant data	ervices) and on those tern ne or other organisation eing related purposes, inc	s. I agree for my inform	nation to be kept and
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Student Signatu	re:	D	D M M V V	v v