

Full-Time Course Application Form



CITY of BRISTOL
COLLEGE

In signing this agreement you are authorising the College to pass information provided by you on the form to the Skills Funding Agency (SFA), which is registered under the Data Protection Act 1998. You are also authorising the College to release non-sensitive information for other purposes as set out in the College's data protection registration. A more detailed explanation and further information on data confidentiality is available on request from Corporate Services.

Please complete this form clearly in black pen. Please use block capitals.

About you

Last name

First names

Title (Mr/Mrs/Miss/Ms)

Date of birth

Age on 31 August in year of entry Male Female

Nationality

English Scottish Welsh N. Irish

Other

In which country do you normally live? (if not the UK)

Residence

Have you been resident in the UK/EU for the last 3 years? Yes No

If you weren't born in the UK or European Union, how long have your parents lived here? Year/s

Are there any immigration restrictions on how long you can stay in the UK? Yes No

Was your purpose for entering the UK/EU mainly to receive full-time education? Yes No

Are you a registered asylum seeker? Yes No

Date of arrival in UK/EU?

Equal opportunities

The College is committed to equality of opportunity. To help us monitor our progress towards this please tick the relevant boxes below.

Do you consider yourself to have a disability and/or learning difficulty and/or health problem? Yes No

Is English your first language? Yes No

How would you describe your ethnic background?

- | | |
|---------------------------------------------|-------------------------------------------------------------|
| 81 <input type="checkbox"/> Bangladeshi | 19 <input type="checkbox"/> Mixed – White + Asian |
| 15 <input type="checkbox"/> Black African | 20 <input type="checkbox"/> Mixed – White + Black African |
| 16 <input type="checkbox"/> Black Caribbean | 21 <input type="checkbox"/> Mixed – White + Black Caribbean |
| 10 <input type="checkbox"/> Black UK | 22 <input type="checkbox"/> Mixed – other |
| 17 <input type="checkbox"/> Black – other | 23 <input type="checkbox"/> White – British |
| 18 <input type="checkbox"/> Chinese | 24 <input type="checkbox"/> White – Irish |
| 82 <input type="checkbox"/> Indian | 25 <input type="checkbox"/> White – other |
| 83 <input type="checkbox"/> Pakistani | 99 <input type="checkbox"/> Not known/not provided |
| 84 <input type="checkbox"/> Asian – other | |

Unique Learner Number (ULN) if known

Your address

House No. Postcode

Contact details/email

Home Tel.

Mobile

Email

Present or most recent school/college

Postcode

Please tick here if you have a National Record of Achievement

Have you attended the College through a schools link programme? Yes No

If so, which year?

Support for your course

Tick this box if you would like advice or support for any of the following: dyslexia, disability, sight/hearing impairment, mental health, medical conditions, special arrangements for exams, help with Maths, English, language, childcare, finance, welfare.

If you tick the box above someone from Learner Services will contact you.

Your choice

Please enter the title, code and preferred centre (if applicable) of your course.
The Admissions team will deal with your application as quickly as possible. An interview or interviews will be arranged for you.

1st choice

Course title or area of study

Course code (optional) Preferred College Centre

Please enter if code is provided in course description.

2nd choice (not compulsory)

Course title or area of study

Course code (optional) Preferred College Centre

Please enter if code is provided in course description.

Please explain briefly why you have chosen your courses. Or, if you have only selected an area of study, please outline your reasons for choosing this area and what your career/learning goals will be following your time with the College. We ask you to do this only to check you will achieve the appropriate qualifications for what you want to do in the future.

Qualifications

If you have any qualifications please list them here, or if you are working towards your qualifications please list any predicted results. If you are not a UK resident you must send copies of your qualifications (including English Language) translated into English with your application.

Subject e.g. English, Maths etc	Level e.g. GCSE, NVQ 2, A Level etc	Month/year completed or expected to complete	Results (if known)	Predicted results (if known)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Is there anything that you are required by law to tell the College?
Yes No Not sure If you tick 'Yes' or 'Not sure' someone from the College will contact you.

Your signature

Date

I declare that the information I have disclosed is true and accurate to the best of my knowledge.

Parent/guardian signature if under 18

If you do not wish to be contacted by the SFA or its partners in respect of surveys and research please tick

If you do not wish to be contacted about courses or learning opportunities by post, email or text please tick

You are not able to opt out of having a ULN created. However, you can choose not to share the participation and achievement part of your ULN record. To do this, either call 0845 602 2589 to speak to the MIAP helpdesk, visit www.miap.gov.uk or tick the box here.