



# INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

## FOR OFFICE USE ONLY

Date Received

Student Number

## COURSE NAME

Year of Entry (eg 2010)

Please state the title of the course for which you are applying

Year of Course (1st, 2nd, 3rd)

Full Time

Part Time

First Choice:

Second Choice:

## PERSONAL DETAILS

First Names

Gender (M/F)

Surname

Age

Previous Surname (if any)

Date of Birth (day/month/year)

Title

(Ms/Miss/Mrs/Mr/Other)

Contact Address

Correspondance (agent's address)

Home Address (if different)

Postcode

Postcode

Telephone Number

Home

Mobile

Email Address

If you would like assistance with accommodation, please tick box

If you would like information on our College Nursery, please tick box

Nationality

Country of Birth

Will you have been resident in the UK/European Economic Area for 3 years immediately before the start date of your course?

Yes

No

Language(s)

Date of first entry to UK

Number of years resident in UK

Other European Economic Area

Please note that evidence may be required to support residency for fee status.

## ENGLISH LANGUAGE QUALIFICATIONS

Name of Exam (please tick appropriate box) IELTS  TOEFL  Others

Score/Band

Date of Exam

If your choice is "others" please specify the exam name

## EDUCATIONAL QUALIFICATIONS

(Please submit copies of all transcripts and certificates with application.)

Qualification Title, Subject and Level	Name of College/School/Institution	Month/Year Left	Result Awarded	Results Pending (if any)

## WORK EXPERIENCE

(Please submit copies of all transcripts and certificates with application.)

(Please enter periods of employment in chronological order, with most recent at top.)

Name of Organisation	Place and Country	Designation Held	Month/Year (From)	Month/Year (To)

## OTHER QUALIFICATIONS

(Please submit copies of all transcripts and certificates with application.)

Name of Examining Body	Details of Qualification	Overall Result	Year Awarded

## PERSONAL STATEMENT

Please tell us why you decided to choose this course and a little about yourself. This should include your current or previous employment, work experience, hobbies and what you have been doing most recently. Continue on a separate sheet if necessary.

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Information gathered in the following sections is not used in the selection process but is required for statistical purposes and to help us identify any support needs you may have.

## DISABILITY/HEALTH OR MEDICAL CONDITIONS

Please tick the boxes which describe you best.

I do not have any disabilities	<input type="checkbox"/>
I have a specific learning disability (eg dyslexia)	<input type="checkbox"/>
I am blind/partially sighted	<input type="checkbox"/>
I am deaf/have a hearing impairment	<input type="checkbox"/>
I am a wheelchair user/have mobility difficulties	<input type="checkbox"/>
I have an autistic spectrum disorder, eg Asperger's Syndrome	<input type="checkbox"/>
I have personal care support	<input type="checkbox"/>
I have mental health difficulties	<input type="checkbox"/>
I have an unseen disability, eg. diabetes, epilepsy, asthma	<input type="checkbox"/>
I am having treatment for cancer	<input type="checkbox"/>
I have multiple difficulties	<input type="checkbox"/>
I have a disability not listed above	<input type="checkbox"/>

Likely support needs

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If you have a disability or support needs then we will send you relevant information.

## ETHNIC ORIGIN

Ethnic Origin (Please tick one box)

<input type="checkbox"/>	Scottish	White
<input type="checkbox"/>	English	
<input type="checkbox"/>	Welsh	
<input type="checkbox"/>	Irish	
<input type="checkbox"/>	Any other White background	

<input type="checkbox"/>	Indian	Asian
<input type="checkbox"/>	Pakistani	
<input type="checkbox"/>	Bangladeshi	
<input type="checkbox"/>	Chinese	
<input type="checkbox"/>	Any other Asian background	

<input type="checkbox"/>	Caribbean	Black
<input type="checkbox"/>	African	
<input type="checkbox"/>	Any other Black background	
<input type="checkbox"/>	Information refused/ Not known	

<input type="checkbox"/>	White and Black Caribbean	Mixed
<input type="checkbox"/>	White and Black African	
<input type="checkbox"/>	White and Asian	
<input type="checkbox"/>	Other Mixed	
<input type="checkbox"/>	Any other background	

## OCCUPATIONAL BACKGROUND

If you are under 21, please tell us the occupation of your highest earning parent, step-parent or guardian. If they are retired or unemployed, tell us their most recent occupation.

Occupation of Parent/Guardian \_\_\_\_\_

If you are over 21, please tell us your occupation.

Your Occupation \_\_\_\_\_

Has any parent, guardian or other carer responsible for your upbringing studied at university? Yes  No

## MARKET RESEARCH

What was the most important source of information in your decision to apply to Perth College?

Enter the appropriate code in this box from the following list:

FT Prospectus	NE Press advert/article	OD Visit to college
RA Radio/TV	FF Friend/family	CSS Student Services
WEB www.perth.ac.uk	INT Other website	AGT Agent
RAF Referral		

If you used more than one source, please enter codes for the two next most important ones in the following boxes.

<input type="text"/>	<input type="text"/>
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## REFERENCES

Name \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone Number \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

I live outside the EU. I enclose a deposit of £100 along with this application form.

I am paying by: cheque  bankers draft  bank transfer  (Not required if applying through an Agent)

I confirm that to the best of my knowledge, the information given in this form is correct.

Signature

Date

Signature of Parent or Guardian.

Signature

Date

### COLLEGE USE ONLY

Course \_\_\_\_\_

Date of Entry \_\_\_\_\_

Decision \_\_\_\_\_

Signature

Date

After the conditions are fulfilled you will be sent an Unconditional Offer Letter which you can use to apply for your visa (if required).

Perth College is registered under the 1998 Data Protection Act. By signing this form you consent to Perth College holding and processing your personal data for all purposes connected with the College's statutory and business requirements. Where required, your information may be supplied to other official agencies.

If you are applying for or intending to progress to a degree course, the degree for which you will study is currently validated by one of the following universities - University of Aberdeen, The Open University or University of Strathclyde. UHI Millennium Institute ("UHI") is currently seeking taught degree awarding powers. By accepting an offer, you agree that any degree for which you study may, at the sole discretion of UHI, be awarded by UHI rather than University of Aberdeen, The Open University or University of Strathclyde once UHI is granted degree awarding powers.

Please return your completed application form to:

**International Centre, Perth College, FREEPOST TY 333, PERTH PH1 2BR.**

**Direct Line: (+)44 1738 877753/877268 E-mail: perthinternational@perth.uhi.ac.uk**

**www.perth.ac.uk**

Last revised 17/12/07

Perth College is helping to create the University of the Highlands & Islands, as a partner in UHI Millennium Institute.