South West College Application Form 2016-17 South



All personal data will be held in accordance with the provision of the Data Protection Act 1998

Surname: *			Fornames(s): *	
Title: Mr/Mrs/N	/liss/Ms/Dr		Date of Birth: *	
Home Address	*		Gender: *	
Tel No: *			Postcode: *	
Email: *			Mobile: *	
Present/Last So	:hool: *		Town:	
Are you applyir	ng for (please tick): Full-Time	Pa	art-Time Training	* Mandatory Fields
Choice	Course Code		Course Title	Campus
1				
2				
3				
		4	Campus Locations: Cookstown [C] Dungannon [D] Enr	niskillen [E] Omagh [O]
	ich course to apply for and would like an ir S ALREADY TAKEN/TO BE TAKEN	nterview with	a careers advisor	

Year	Level [e.g. G.C.S.E]	Subject	Grade [if exam completed]

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, , , , , , , , , , , , , , , , , , ,	r learning difficulties/c	lisabilities fo	or which you may need extra sur	port?	Yes 🗌 No	
If yes, please state			, , , ,	·		
MARKETING - please indicate h	now you heard about 1	he College				
Prospectus	Course Leaflet		Careers Teacher/School	🗌 Visit to	your school from us	Social Media
Open Event	Newspaper/Rad	io	U Website	Previou	us Attendance	
STUDENT SIGNATURE						
SIGNED:					DATE:	
Completed application forms s	hould be returned to t	he appropri	ate South West College Campu	5:		
Admissions Office		Admissions	s Office		Admissions Office	
		Fairview, 1 Dublin Road, ENNISKILLEN			Fairview, 1 Dublin Road, ENNISKILLEN Co. Fermanagh BT74 6AE Tel: 0845 603 1881	
Co.Tyrone BT71 6BQ Tel: 0845 603 1881 Co. Ferm		Co. Fermar	nanagh BT74 6AE Tel: 0845 603 1881		Co. Fermanagh B1/4	6AE Tel: 0845 603 1881
OFFICE USE:						
Date Received:			Received By:			

Keyed By:		Date Keyed:	
Location Received at: Copies to:	Dungannon Careers	 Enniskillen Omagh Student Support Officer 	If requested, the college can make this application form available in alternative formats including large print, Braille, audio cassette and computer disk.