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Applicant Ref: Student Ref:



Overseas Application Form

York College is committed to creating an environment where there is mutual respect and equality of opportunity

Please complete all sections in BLOCK CAPITALS and BLACK INK (Tick where appropriate)

1	Personal Details					
	Surname/Family Name					
	First Name	Second Nan	ne	Title		
				Mr / Mrs / Miss / Ms / Other		
	Postal Address of normal residence		Address in home country (if different)			
	Phone no:		Mobile:			
	Email:		Daytime Phone no:			
	Day Month Year					
	Date of Birth Country of Birth		Male Female			
			Country of Normal Residence (if not UK)			
	Have you normmally lived outside the UK other than for study during the last 4 years? Yes No If you are currently in the UK, please state date of entry to UK:					
	*Please attach photocopy of passport details plus entry / vi	sa stamp	Have you applied for asylum/refugee status? No			
_	Caurage Applied for					
2	Courses Applied for Please state the course title and level as written in the prospectus	eg: Engineerir	ng GNVQ Foundation, Law A Level, Fashion Design Na	tional Diploma.		
	Course Title (eg. International Foundation Science) Course Level					
			How long do you wish to study?			
			When do you wish to start?	2 0		
			(eg. 09/2008)	20		

3 Education Details						
Name of current or last school / college attended:		Date of leaving: (eg. 06/07))				
4 Qualifications and Employment						
Qualifications (for example: GCSE, HKCEE Highschool Certificate or other) already taken or about to be taken. Please include English Language qualifications (for example IELTS, TOEFL or Cambridge) If you are waiting for an English language test result, please say when this is expected.						
Name of Qualification Subject			Actual Result GRADE Year			
Please send copies of your School Results, wi Please give details of any current or past employment If you are applying for an Art & Design course approximately 20 examples of your work on slides or a	please enclose	riate. Enclosed	Not Enclosed (please tick)			
5 Finance						
Who will be responsible for payment of tuition fees?						
Name:						
wanie.						
Address:						
6 Support With Your Learning						
Do you think you would benefit from extra support?	NO NO	OFFICE USE ONLY Copy to	Date:			
If yes, please specify: Reading Writing	Please indicate if you may Emotional Needs	need help with any of the following Moderate Learning Difficulty	Severe Learning Difficulty			
Dyslexia Spelling Maths Study Skills	Hearing Impairment Speech Difficulty	Mental III Health Visual Impairment	Dyslexia Physical Disability			
Other	Mobility	Medical Condition				
Please give details:	Please give details:					
Do you speak a language other than English at home? YES	NO	Are you registered disabled?	YES NO			

7	7 Equal Opportunities Monitoring								
	This question doesn't refer to nationality, it is how you would describe yourself (for statistical purposes only):								
	I would describe myself as:								
Ш	01 Bangladeshi	98 Other	0	8 White		06 Indian White			
	04 Black - other	02 Black African	9:	9 Not Known		09 Other Asian			
	07 Pakistani	05 Chinese	0:	3 Black Carribbean		Prefer not to say			
L									
8	Marketing Survey								
	Where did you find out about the cours	ses and the college? (Tick as man	ıv boxes a	as vou wish)					
		Education Agent	,	chool Teacher		College Speaker			
	British Council	Friend/Family	V	isit to College		News or Magazine			
	Website	Exhibition	0	ther (please specify)					
	Have you attended a course								
	at this college before?	YES NO							
9	References								
•	A reference is required for all applicants. Please This will normally be your Head Teacher or some Your completed application form should be return Please note that for cild care courses in order to	one who has taught you. ned to the International Office, York Col o comply with Child Protection Legislati	llege, Sim						
	a 2nd referee is required. This must not be a rela			2nd referee (B) for Ch		•			
Α	A Name:								
	Address:			Address:					
	Postcode:			Postcode:					
	Telephone:			Telephone:					
	Position:			Position:					
l cor	nfirm that the above information is corre	ct: Signature of applicant:				Date:			
FOR COMPLETION BY PARENT OR GUARDIAN OF APPLICANT IF AGED UNDER 18 ON 1 SEPTEMBER BEFORE THE COURSE STARTS									
supp	The application by my daughter/son has my full support. I am prepared to enter into an undertaking to be responsible for all fees and items on loan								
from the college if she/he is accepted. Signature of Parent/Guardian:						Date:			

Please return the completed form to:

The International Office, York College, Sim Balk Lane, York Y023 2BB, United Kingdom with copies of all examination certificates and examples of art work if appropriate.

Data Protection Act 1998

The information you provide on this form will be kept securely and will not be given to anyone outside the college without your permission unless we are required by law to do this (for example, to the British Government Home Office).

Please complete all sections in BLOCK CAPITALS and BLACK INK (Tick where appropriate)

Name of applicant	
Chosen course applied for	



10 Reference

To the referee The college would be pleased if you could complete this section outlining your confidential view of the appropriateness of the applicant for the course chosen. When complete, please return to The International Office, York College, Sim Balk Lane, York Y023 2BB. General comments (eg: character and personality, general health, individual and team contributions, suitability for the course, any additional support which the applicant has been receiving etc.) NO The content of this reference may be disclosed to the student: YES Assessment of potential (complete where appropriate): General behaviour Average Good Poor Motivation Good Average Poor **Punctuality** Good Average Attitude to learning Good Average Poor Attendance Good Average Referee name: Referee signature: Address: ...

Date:

OFFICE USE ONLY	Applicant Ref:

Telephone:

11	Personal Statem	ent					
	Please provide a brief statement about how the course(s) for which you are applying will help you achieve your aims. The following headings may also help you complete this section						
	What do you want to do after you have finished your course?						
	I am interested in the cou	rse and the College because					
I am interested in the course and the College because							
	Please add any information	n you wish					
	OFFICE U	SE ONLY	Applicant Ref:				
	ate Rec'd in ternational Office:		-		Ref required:	YES	NO
	ate interview sent: appropriate) 1				Ref request sent:		
	2		-		Ref returned:		
In 1	terview Dates/Times	Did not attend	Firm offer: Conditional offer:	YES NO			
2			If yes, please specify:				
			Interviewer's signature (if applicable)	»:			
					Date acceptance sent:		
RI	ECOMMENDATION/COMM	ENTS: (Please initial and date)			Course Title:		Code:



Dear Sir / Madam

Please find on the reverse side of this letter a pro-forma to be completed to support the named applicant who has applied to attend a programme of study at York College in the United Kingdom.

We would be grateful if you could complete the sections outlining your confidential view of the appropriateness of the applicant for the course chosen.

When completed, please return to:

International Office York College Sim Balk Lane York YO23 2BB United Kingdom

Many thanks for taking the time to complete this request on behalf of the applicant.

Yours faithfully

Paul Guilfoyle

Head of Central Learner Services