

# Application Form (Access to Higher Education)



If you need help completing this form please ring 01202 205680.

STUDENT ID (FOR OFFICE USE ONLY)

PLEASE COMPLETE ALL SECTIONS OF THE FORM IN BLOCK CAPITALS.

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PERSONAL DETAILS								
Male		Female			Applicants NOT born in the United Kingdom please complete this section:			
Surname:								
Forename(s):					Have you lived in the UK or other European Union/EEA country for the last 3 years?			
Date of birth:			Age on 31 Aug 2019:		Yes		No	
Address for correspondence: Address:					Country of birth:			
					Your nationality:			
					Emergency contact#1:			
Postcode:					Name:			
Telephone:					Telephone:			
Mobile:					Emergency contact#2:			
Email address:					Name:			
National Insurance Number: <input type="text"/>					Telephone:			

\*Remember to include your National Insurance Number

WHAT WOULD YOU LIKE TO STUDY?	
<b>I wish to apply for the following Access to Higher Education Diploma course (please tick appropriate box):</b>	
<b>Humanities:</b> <i>Business, Law, Literary Studies, Psychology, Sociology, History</i>	<input type="checkbox"/>
<b>Health Professions</b>	<input type="checkbox"/>
<b>Social Work</b>	<input type="checkbox"/>
<b>Media</b>	<input type="checkbox"/>
<b>Science</b>	<input type="checkbox"/>
<b>Computing</b>	<input type="checkbox"/>
<b>Music</b>	<input type="checkbox"/>
<b>Pre-Access: Return to Study</b>	<input type="checkbox"/>
<b>I am undecided &amp; would like preliminary guidance with career guidance staff</b>	<input type="checkbox"/>
* Referee name and address will be required.	

MOST RECENT SCHOOL/COLLEGE EDUCATION					
Give details of exams taken or pending Subject	Level eg. GCE/ GCSE/ OCN/NVQ	Results		Date achieved (if applicable)	Name of School/College
		Predicted	Actual		
Maths/Numeracy					
English/Literacy					
Any other qualification					

## IMPORTANT Additional Information

Please note: The information you provide will be used when considering your application

Explain why you wish to follow an Access to HE Diploma course. Please indicate possible career destinations and provide details of career/university research undertaken. Your answer to this question will be used to assess your ability to research your choices and goals.

**(A minimum of 300 words is recommended - please use separate sheet)**

## EMPLOYMENT HISTORY AND WORK EXPERIENCE

Please enter previous and present employment in date order (you may include details of voluntary work) - use separate sheet if  needed. If you are applying for an Apprenticeship and your current employer is supporting you please tick here:

Employer's name and address	Nature of work	From (date)	To (date)

## ADDITIONAL SUPPORT QUESTIONNAIRE

1. Do you have any health or medical conditions? Epilepsy <input type="checkbox"/> Diabetes <input type="checkbox"/> Allergies <input type="checkbox"/> Asthma <input type="checkbox"/> Other – please give details:	5. Do you have any mental health issues? Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered 'Yes' to question 5 please give details:
2. Do you have a disability? Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered 'Yes' to question 2 please give details:	6. Is English your second language? Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered 'Yes' to question 6 please give details:
3. Do you have a learning difference? (e.g. Dyslexia, Dyspraxia etc) Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered 'Yes' to question 3 please give details:	7. Is there any other support you would require whilst at College? Yes <input type="checkbox"/> No <input type="checkbox"/> If you answered 'Yes' to question 7 please give details:
4. Do you have a social worker or support worker? Yes <input type="checkbox"/> No <input type="checkbox"/>	8. Do you have an Educational Health Care Plan? Yes <input type="checkbox"/> No <input type="checkbox"/>

If you require additional space for any questions, please use a separate sheet of paper

**Please declare whether you have relevant\* convictions or current proceedings against you. Yes  No**

\*If you answer yes we will contact you and ask for more details. We are only interested in proceedings or criminal convictions that relate to violence, are of a sexual nature or involve unlawfully supplying controlled drugs or substances. If you fail to declare information it may result in disciplinary action being taken against you once you have enrolled at the college. You will need to declare ALL criminal convictions if you apply for a course in Support/Teaching or Childcare.

## PLEASE RETURN THIS FORM TO:

**ADMISSIONS, THE BOURNEMOUTH & POOLE COLLEGE, FREEPOST BH969, BH14 0BR (No stamp required)**

The College Admissions team will acknowledge receipt of your application form (usually within 5 working days). If you have any queries regarding the progress of your application please contact Admissions on 01202 205680

All personal information that Bournemouth & Poole College holds is processed in accordance with current UK data protection legislation. The College is the data controller and contact details for our data protection officer can be found on our website [thecollege.co.uk](http://thecollege.co.uk). The information you provide on this form will be used for providing the services outlined in this document. Your data may be shared with other public bodies for purposes of funding and regulatory compliance. We will contact you where necessary in order to provide the service detailed in this document. For more information about how we use your data, please see our full privacy notice at [thecollege.co.uk/privacy-notice](http://thecollege.co.uk/privacy-notice)

The College is committed to equal opportunities. See our Equality and Diversity policy on The College website for more details. We may contact any recent education provider to request information. By signing this document you agree that your personal information can be processed and used in this way.

I confirm I have read the College Terms and Conditions and College Payment Policy. These can be found online - [thecollege.co.uk/policy](http://thecollege.co.uk/policy)

## DECLARATION

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

**Signature of applicant:**

Date: