

Application Form

to BTEC Higher National Courses 2012/2013

OFFICIAL USE ONLY Interview details	Date and time
Venue	Interviewer

STUDENT NO.

Please complete in BLOCK capitals using a ballpoint pen.

Please note: If you need help with completing this form, please contact our Admissions Team on 01223 418448.

1 Surname	Forename(s)	Mr/Mrs/Ms/Miss	2 Date of Birth
			D M Y
3 Home Address		Age (on 31 August 2012) _____	

Postcode	Home Tel	Mobile	Email
----------	----------	--------	-------

4 Place of Work (if applicable)
--

Current Role (if applicable)	Work Tel
------------------------------	----------

5 ULN/UCN No/EBS No (if known)

6 Education Details - school/colleges attended aged 16-18 (if applicable)		
	From	To

7 Course applied for

8 Those not applying directly from schools or colleges, please indicate your present status		
Employed full-time <input type="checkbox"/>	Employed part-time <input type="checkbox"/>	Unemployed <input type="checkbox"/>

9 Resident status (to determine level of fees)	
Usual country of residence	Do you or your spouse have a restriction on your passport? Yes <input type="checkbox"/>
Nationality	No <input type="checkbox"/>
Have you been resident in the European Economic Area for the past 3 years?	If YES, does one of the following apply
Yes <input type="checkbox"/> No <input type="checkbox"/> If NO, give date of entry to the EEA:	<input type="checkbox"/> Seeking asylum <input type="checkbox"/> Have exceptional leave to remain
	<input type="checkbox"/> Recently married to an EEA resident <input type="checkbox"/> Other

10 Equal Opportunities	11 Additional Support Details
To help the College monitor its Equal Opportunities Policy, please tick the appropriate box:	We want you to get the best from your course, so please let us know how we can support you. If you have any learning support needs, disabilities or medical conditions, we can contact you in confidence to discuss the support available. Please indicate below what support needs you may have:
<input type="checkbox"/> 31. White English/Welsh/Scottish/Northern Irish/British <input type="checkbox"/> 32. White Irish <input type="checkbox"/> 33. White Gypsy or Irish Traveller <input type="checkbox"/> 35. White and Black Caribbean <input type="checkbox"/> 36. White and Black African <input type="checkbox"/> 37. White and Asian <input type="checkbox"/> 34. Any other White Background <input type="checkbox"/> 38. Any other Mixed/multiple ethnic background <input type="checkbox"/> 47. Arab <input type="checkbox"/> 39. Asian/Asian British Indian <input type="checkbox"/> 40. Asian/Asian British Pakistani <input type="checkbox"/> 41. Asian/Asian British Bangladeshi <input type="checkbox"/> 42. Asian/Asian British Chinese <input type="checkbox"/> 43. Any other Asian background <input type="checkbox"/> 44. Black/African/Caribbean/Black British African <input type="checkbox"/> 45. Black/African/Caribbean/Black British Caribbean <input type="checkbox"/> 46. Any other Black/African/Caribbean/Black British Caribbean <input type="checkbox"/> 98. Any other ethnic group	<input type="checkbox"/> Autism Spectrum Conditions <input type="checkbox"/> D/deaf/Hearing Impaired/ Hard of Hearing <input type="checkbox"/> Dyslexia/Dyspraxia/ Dyscalculia <input type="checkbox"/> Epilepsy <input type="checkbox"/> Language Impairment <input type="checkbox"/> Mental Health Difficulties <input type="checkbox"/> Disability affecting mobility <input type="checkbox"/> Visual Impairment <input type="checkbox"/> Emotional Behavioural Difficulties <input type="text"/> <input type="checkbox"/> Other: <input type="text"/>
	Alternatively, please feel free to contact the Information & Advice Team on 01223 226315/418249 to discuss further.

12 Criminal Convictions, Cautions, Reprimands, Warnings etc. (please see Guidance Notes)

13 Have you had individual career guidance to discuss your programme choice?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
---	------------------------------	-----------------------------

14 Academic/Vocational Qualifications + Level	Awarding Body	Estimated Grade	Date Achieved

15 Employment or Work Experience to Date

16 Please tell us how you first heard about the College (please tick one box only)

- Friend/Family
- School/College
- Current CRC Student
- Open Day
- Advertising
- (School) Guidance Advisor
- Careers Event
- Website
- Facebook
- Other (please indicate below)

17 All applicants for Higher Education courses have to supply a reference.

If you are under 19 and/or have been in full-time education for the last 2 years, your reference should be from your current or most recent school or college. If you are 19 or over and in employment, please supply a reference from your current employer. If you are 19 or over and haven't been in employment or full-time education for the last 2 years, you will still need to provide a written reference from a responsible person other than a family member or a friend. We would request that the reference includes details on the following areas: predicted achievement or application to work tasks, motivation, general behaviour and relationships with others, attendance, punctuality, reliability and other relevant comments. Please attach your reference to this form, or have it sent separately to the Admissions Office (address at bottom of page).

18 Personal Statement (please continue on A4 paper and attach securely to this form)

Signature of applicant	Date
Print Name	

Please return completed form and reference to:
The Admissions Office, Cambridge Regional College, Kings Hedges Road, Cambridge CB4 2QT