

CANTERBURY COLLEGE 2018/19 APPLICATION FORM



Following the completion of this form you will be invited in for an interview where you will have the opportunity to discuss the programme and consider whether it is the right option for you.

PLEASE COMPLETE IN BLOCK CAPITALS USING A BALLPOINT PEN

Have you applied to or studied at Canterbury College before? YES NO
If Yes, please state the year:

FOR COLLEGE USE ONLY

Date Received	Date logged	By whom
<input type="text"/>	<input type="text"/>	<input type="text"/>
Learner ref no	<input type="text"/>	<input type="text"/>

PERSONAL DETAILS

TITLE (MR/MRS/MS/MISS)
SURNAME/FAMILY NAME
FORENAMES

DATE OF BIRTH

AGE ON 31 AUGUST 2018

HOME ADDRESS

POSTCODE

CONTACT ADDRESS (if different from above)

POSTCODE

TELEPHONE (DAY)

TELEPHONE (EVENING)

MOBILE

EMAIL

GENDER MALE FEMALE

NATIONAL INSURANCE NUMBER (if known)

PARENT OR NEXT OF KIN/EMERGENCY CONTACT

SURNAME/FAMILY NAME

FORENAME

RELATIONSHIP TO YOU

TELEPHONE

MOBILE (optional)

EMAIL

COURSE(S) APPLIED FOR

If you are not sure which course you would like to study and would like to talk to a member of our course guidance team before deciding, please tick this box

If you are unsure about the level (BTEC Introductory, First, National for example) this can be discussed at interview.

PLEASE CHOOSE ONE OR UP TO TWO COURSES
MAXIMUM

1

2

PLEASE GIVE THE NAME OF THE EDUCATIONAL
ESTABLISHMENT YOU LAST ATTENDED

FOR COLLEGE USE ONLY - ADDITIONAL NOTES

CONDITIONAL OFFER:

UNCONDITIONAL OFFER:

TUTOR SIGNATURE:

TUTOR NAME:

DATE:

MEDICAL HISTORY

DO YOU CONSIDER YOURSELF TO HAVE A MEDICAL CONDITION OR DISABILITY? YES NO

IF YES, PLEASE TICK THE APPROPRIATE BOXES

Visual Impairment	Hearing Impairment	Ability affecting mobility
Profound Complex Disabilities	Mental Health Difficulties	Emotional/ Behavioural Difficulties
Multiple Disabilities /Support Needs	Asthma	Diabetes
Epilepsy	Haemophilia	Asperger's Syndrome
Other - e.g allergies Please specify		

ADDITIONAL LEARNING SUPPORT

DO YOU CONSIDER YOURSELF TO HAVE A LEARNING DIFFICULTY? YES NO

If yes, to assist us in meeting your learning support needs, please indicate any learning difficulty below (tick as appropriate)

Reading	English Language	Writing	Dyscalculia
Numeracy	Moderate Learning Difficulty	Dyslexia	Severe Learning Difficulty
Multiple Learning Difficulties	Autism Spectrum Disorder	Other (please specify)	

DO YOU HAVE AN EHCP (EDUCATION, HEALTH & CARE PLAN)? YES NO

DO YOU HAVE SPECIAL EXAM ARRANGEMENTS AT SCHOOL YES NO

DO YOU NEED SUPPORT AT YOUR COURSE INTERVIEW? YES NO

WHAT SORT OF HELP WOULD YOU LIKE?

CRIMINAL CONVICTIONS

This information will be used to ensure that a suitable course is identified and to maintain a safe College environment

DO YOU HAVE ANY CRIMINAL CONVICTIONS OR HAVE YOU RECEIVED A REPRIMAND, CAUTION OR FINAL WARNING FROM THE POLICE? YES NO

White - British	Mixed - White and Asian	Asian or Asian British - other Asian background
White - Irish	Mixed - any other mixed background	Black or Black British - African
Gypsy / Irish Traveller	Asian or Asian British - Indian	Black or Black British - Caribbean
White - any other White background	Asian or Asian British - Pakistani	Black or Black British - other Black background
Mixed - White and Black Caribbean	Asian or Asian British - Bangladeshi	Arab
Mixed - White and Black African	Chinese	Any other
		Not known/ Not provided

RESIDENCY DETAILS

NORMAL COUNTRY OF RESIDENCE

NATIONALITY

WILL YOU HAVE BEEN RESIDENT IN THE EUROPEAN UNION (EU) OR EUROPEAN ECONOMIC AREA (EEA) FOR THE LAST 3 YEARS PRIOR TO SEPTEMBER 2018?

YES NO

IF NO, PLEASE STATE THE DATE OF YOUR MOST RECENT ENTRY INTO THE EU AND PREVIOUS COUNTRY

DATE:

COUNTRY:

QUALIFICATIONS ON ENTRY

Please list below all the qualifications you have or will be taking. Make sure that you fill in expected grades where applicable as these details will help us to place you on the most suitable course.

GCSE/O LEVELS

SUBJECT	DATE TAKEN (mm/yy)	EXPECTED GRADE	ACTUAL GRADE
MATHEMATICS			
ENGLISH LANGUAGE			
ENGLISH LITERATURE			
FRENCH			
GERMAN			
BIOLOGY			
CHEMISTRY			
INFORMATION TECHNOLOGY			
DESIGN TECHNOLOGY			
OTHER SUBJECTS			
SCIENCE SUBJECT			

A LEVELS/AS LEVELS

SUBJECT	DATE TAKEN (mm/yy)	EXPECTED GRADE	ACTUAL GRADE

BTEC GNVQS/DIPLOMAS/CERTIFICATES/AWARDS

SUBJECT	DATE TAKEN (mm/yy)	EXPECTED GRADE	ACTUAL GRADE

OTHERS (E.G. NVQS/DEGREES)

SUBJECT	DATE TAKEN (mm/yy)	EXPECTED GRADE	ACTUAL GRADE

