

Date Received

# Application 2009/10



Please complete this form in **CAPITAL LETTERS** using black or blue ink

## 1. Course information

Please write here the name of the course for which you are applying.

Admissions code  -

Some courses offer a choice of when you can study, eg 3 days per week or 2 evenings per week (see the course entry in the prospectus). **If there is a choice**, please indicate which you would prefer.

## 2. Information about you

Title (Please indicate)       Male  Female  (Please tick correct box)

Last Name

First Name

Middle Name(s)  Date of Birth

Address

Post Code  Home Tel No (include area code)

Telephone Nos  Mobile Tel No  Work Tel No (include area code)

Email address

3. Are you a UK, EEA or Swiss national? Yes  No

Have you been resident in the UK since 1 September 2006? Yes  No

## 4. Learning Support Needs (Please tick all that apply)

Mental Health Service User  Wheelchair User  Visually Impaired  Hearing Impaired

Other Physical Disability  Learning Difficulty  Dyslexia  No Special Needs

Other

Do you wish to discuss your needs confidentially with an appropriate member of staff?

Yes  No

We may be able to offer you a range of assistance, so please describe the support or equipment that you need here.

Are you happy for this information to be passed on in order for your support needs to be met?

Yes  No

## 5. Your education and training background

List the colleges/training organisations you have attended (most recent first).

Dates		College/Training Organisation
From	To	
eg Sept 2007	July 2008	Lambeth College

List any qualifications in date order (most recent first), including exams to be taken before September 2008.

Date	Qualification	Subject	Result
eg June 2008	GCSE	Maths	Grade C

## 6. Work experience/employment history - paid, voluntary or through college (most recent first).

Dates	Work Experience/Employment History

## 7. Tell us why you wish to take this course and what you plan to do in the future.

I understand that the information given on this form can be used for any matter related to my application for a programme of study, and for marketing and research purposes either by the College or by organisations employed by the College to undertake such work. I give my consent to the processing of data on this form on the understanding that the information I have supplied will be used only for the purposes set out above and my consent is conditional upon the College complying with its obligations and duties and in accordance with the College's registration under the Data Protection Act 1998.

## 8. Signature of Applicant

Date

Please return this form to: **FREEPOST RRSX-ULLC-YJXJ**, The Course Advice and Information Service, Lambeth College, Clapham Centre, 45 Clapham Common South Side, London SW4 9BL.