

University Centre Doncaster

Post-Graduate & Professional Courses

Application Form

Programme

Please complete in BLOCK CAPITALS, in black ink, or typescript.

Personal Details

First Name

Surname

Title

National Insurance Number

Previous Surname (Family Name) if applicable

Home Address

Business Address

Post Code

Post Code

Telephone Number

Telephone Number

Fax Number

Fax Number

E-mail

E-mail

Country of Birth

Nationality

Date of Birth

Gender

Male

Female

Don't forget to photocopy your completed application form before sending it to:
Higher Education Admissions, University Centre Doncaster, High Melton, Doncaster DN5 7SZ

Tel: 01302 553835

Email: he@don.ac.uk

Copies of certificates with transcripts must be attached. Originals of both, or attested copies, will be required for registration

Education and Academic Qualifications				
Year From	Year To	University, College, other institution, or degree awarding body	Name of programme or title of degree	Classification obtained (if applicable)

Professional Qualifications			
Year Taken	Professional Body	Examination	Stage

Other Programmes Attended			
Year Taken	Professional Title	Organisation conducting the Programme	Duration

INTERNATIONAL STUDENTS: PROFICIENCY IN ENGLISH

International Students (whose first language is not English) must provide evidence of formal qualifications they hold indicating their ability to communicate in English. Details of acceptable English Language qualifications and an explanation of how to apply on the basis of professional usage of English are provided.

Please attach evidence of English Language qualifications where available.

Details of proficiency in English

EMPLOYMENT DETAILS

Please give details of any employment, with dates, starting with your current or most recent position. You may attach a CV if you think this would be helpful.

Date Start	Date Finish	Employer	Position held and responsibilities

Disabilities

The University Centre, Doncaster is committed to providing equal opportunities. To help with this it is helpful to collect information from all applicants.

Are you registered disabled? Yes No

Disabled not registered? Yes No

Please state the nature of your disability by ticking the relevant section

- 1 Dyslexia
- 2 Blind/partially blind
- 3 Deaf/hearing impairment
- 4 Wheelchair user/mobility
- 5 Personal care support
- 6 Mental Health
- 7 An unseen disability eg asthma, diabetes, epilepsy
- 8 Multiple disabilities
- 9 A disability not listed

Ethnic Origin

The information is required for statistical purposes. This section is optional; you do not need to complete it if you would prefer not to.

The categories specified below are those used in the national census of population and in which University Centre Doncaster has to provide statistical information to the Higher Education Statistics Agency.

Please tick where appropriate

- 1 White
- 2 Black Caribbean
- 3 Black African
- 4 Black Other
- 5 Indian
- 6 Pakistani
- 7 Bangladeshi
- 8 Chinese
- 9 Asian
- 10 Other
- 11 Declined to answer

Referees

(Please see the Guidance Note about references for further information). You should usually provide one academic and one professional reference from your present or most recent employer, where possible. References should be submitted with this application form. Please give the name and address of two referees from whom you have requested references.

Name and Address

Name and Address

Telephone Number

Telephone Number

Fax Number/E-mail

Fax Number/E-mail

How did you find out about this Degree Programme?

- At an education exhibition or fair
- From a friend or colleague
- Internet
- Other - please describe

- Open Day
- Poster or Handout
- Advertisement

if, so please give the name of the publication you saw the advertisement in.

Declaration

I declare that the information provided in support of my admission to, and registration with, the University Centre, Doncaster is accurate and complete to the best of my knowledge, and I understand that providing false or misleading information may render my admission invalid.

Signature

Date