

<p>Please use BLOCK CAPITALS throughout</p> <p>PERSONAL DETAILS</p> <p>Title Dr/Mr/Mrs/Miss/Ms:</p> <p>Surname/Family name:</p> <p>Forenames:</p> <p>Correspondence Address:</p> <p>.....</p> <p>.....</p> <p>..... Post Code</p> <p>Tel No: <i>(please include international code if applicable)</i></p> <p>.....</p> <p>Fax No:</p> <p>Email Address:</p> <p>Home Address: <i>(if different from above)</i></p> <p>.....</p> <p>..... Post Code:</p> <p>Tel No: <i>(please include international code if applicable)</i></p> <p>.....</p> <p>Fax No:</p>	<p>APPLICATION No:</p> <hr/> <p>APPLICATION FOR ADMISSION TO: <i>(Please tick as appropriate)</i></p> <p><input type="checkbox"/> POSTGRADUATE PROGRAMME</p> <p><input type="checkbox"/> UNDERGRADUATE PROGRAMME</p> <p>MODE OF STUDY:</p> <p><input type="checkbox"/> FULL TIME</p> <p><input type="checkbox"/> PART-TIME</p> <p><input type="checkbox"/> DISTANCE/OPEN LEARNING</p> <hr/> <p>ACCREDITATION OF PRIOR LEARNING</p> <p><input type="checkbox"/> DO YOU WISH TO APPLY FOR APL? <i>(Please tick box if YES)</i></p> <hr/> <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; padding: 5px;"><i>Day</i></td> <td style="text-align: center; padding: 5px;"><i>Month</i></td> <td style="text-align: center; padding: 5px;"><i>Year</i></td> </tr> <tr> <td style="text-align: center; padding: 5px;">Date of Birth: <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/></td> <td style="text-align: center; padding: 5px;"><input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/></td> <td style="text-align: center; padding: 5px;"><input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/></td> </tr> </table> <p>Nationality:</p> <p>Area of permanent residence:</p> <p>Country of birth:</p> <p>If you were born outside the UK, but now live in the UK, please give date when you began living here permanently.</p> <p style="text-align: right;">.....</p>	<i>Day</i>	<i>Month</i>	<i>Year</i>	Date of Birth: <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>
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<p>Do you have any unspent criminal convictions, excluding motor offences? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><i>(If yes please provide details on a separate sheet.)</i></p>	<p>Do you have any disabilities or special needs? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p><i>Please give brief details:</i></p>						
<p>1 FIRST PROGRAMME CHOICE</p> <p>a) i) Title of programme: ii) Intended Award eg BA, PG Diploma etc:</p> <hr/> <p>b) Intended start date:</p> <hr/> <p>c) Is this application for first year entry of course? If NO please specify year:</p> <hr/> <p>COMBINED SUBJECT PROGRAMMES ONLY <i>(Three subjects must be chosen for Stage 1 entry)</i></p> <p>d) i) Subjects to be studied:</p> <hr/> <p>ii) Alternative choice of subjects:</p> <hr/> <p>FOR PG CAMS ONLY</p> <p>Name of Programme Leader <i>(see prospectus)</i>:</p>							
<p>2 ALTERNATIVE PROGRAMME CHOICE <i>(if appropriate):</i></p> <p>Subject choice <i>(if appropriate)</i>:</p>							

4 **WORK HISTORY** - State in date order (most recent first) details of your work history, paid or unpaid, which you believe relevant to your application

Position	Dates From	To	Brief description of responsibilities

If you are currently in employment and applying for a course please supply name and address of sponsor if applicable.

Name:

Position:

Address

5 **STATEMENT IN SUPPORT OF YOUR APPLICATION.** You are invited to use this opportunity to provide information in support of your application including previous areas of study, areas of research, reasons for applying for this programme and how you would benefit from it. You may also include non-academic aspects of your experience, including hobbies/interests, participation in any clubs/societies, voluntary community work, parenting etc.

(a continuation sheet can be used)

I declare that, to the best of my knowledge, the information given in this form is correct. I give my consent to the processing of my data by the University of Derby.

Signature: Date:

NOTE: Applicants should now forward this completed form, including transcripts of completed courses to their Referee for completion (if applicable), with a stamped envelope addressed to the Admissions Officer, University of Derby, Kedleston Road, Derby DE22 1GB.

6 **REFERENCE** (This is required for all courses, unless otherwise stipulated. For those who have been in continuous education this would normally come from your FE/HE course tutor etc.)

Name of Referee: Telephone number:

Position/Occupation:

Name and address of school/FE/HE Institution/Employer:

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When you write personal comments about an applicant, please remember that under the Data Protection Act, the applicant can ask for a copy of the reference and other personal information that we have about them.

Signature: Date: