

Application Form



First-time applicants must complete all sections. The form may be returned if information is incomplete.
Returning learners may omit sections 4, 9 & 10.

Please indicate if you are applying for a course which is (A) Full Time , (B) Part Time or (C) Apprenticeship

Personal Details

Title (Mr/Miss/Ms/Mrs):		Student ID [Office use only]	
Forename:		Academic Year:	
Legal Surname:		Date of Birth:	/ /
Legal sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Email (please print clearly):		

Please indicate the gender you identify as: Male Female Non-Binary Other: _____

Home Address:	Correspondence Address (if different from home):
Postcode:	Postcode:
Home Phone Number:	National Insurance Number:
Mobile Phone Number:	

Residency & Nationality - Information to assess your fee status

1) What is your nationality?

2) Have you lived in the UK, EU or EEA for the previous 3 years?: Yes Go to **Section 3** No Fill out this section

3) In which country do you normally live? _____

4) What date did you enter the UK? _____

5) Which country did you live in before coming into the UK? _____

6) How long have you lived there? _____

Title of Course(s)

Please refer to the prospectus for the correct course title(s) of the course(s) you would like to apply for. Don't worry if you are unsure about which course you would like to study. To discuss the options available to you please call our Careers Advisor on 01432 365382.

Course Title	Prospectus Page No.

Undecided about what to study at college? (Please tick for an informal chat with our Careers Advisor)

Previous Education

Name and address of present/last school or college attended:	Start Date: / /	Finish Date: / /
.....		
.....		
.....		
Post Code:		

SECTION 1
SECTION 2
SECTION 3
SECTION 4

Level of Entry

Do you have any of the following qualifications prior to starting the course? (Please tick the appropriate box).

Level 0	Word Power/ Number Power				
Level 1	GCSE D-G (grades 3-1) or less than 5 GCSE at A-C (grades 9-4), 1 AS Level	BTEC/EDEXCEL 1 st Certificate GNVQ Foundation	NVQ Level 1	C&G Operative Award	C&G Operative Award
Level 2	5 or more GCSE at A-C (grades 9-4) 2 or 3 AS Level or 1 A Level	BTEC/EDEXCEL 1 st Diploma GNVQ Intermediate	NVQ Level 2	C&G High Operative/Craft	RSA/OCR Diploma Pitman Intermediate Level 2
Level 3	4 or more AS Level 2 or more A Level	BTEC/EDEXCEL Nat Cert/ Dip GNVQ Advanced	NVQ Level 3	C&G High Advanced Craft Access to HE	RSA/OCR Stage 3 Adv Diploma ESOL Advances Award
Level 4	First Degree	BTEC/EdEXCEL HNC/ HND Other Higher Cert or Diploma	NVQ Level 4	Teaching Qualification including PGCE	RSA/OCR Adv Certificate RSA/OCR Higher Diploma
Level 5	Higher Degree	DMS MBA	NVQ Level 5	Other Professional Qualification	
Other (please specify)					
No formal qualifications					

All full-time applicants including apprentices, please list all previous qualifications showing grades expected or achieved (please include any completed or uncompleted apprenticeships).

Subject Title	Awarding Body	Grade Expected	Grade Actual

Employment (including part time/voluntary)

Name and address including postcode of employer	Position held/nature of business	Date of employment

References

Please provide the name and **FULL ADDRESSES** of two character referees.

1. Name:	Address:	Postcode:
2. Name:	Address:	Postcode:

Accessibility

Disability is defined as any physical or mental impairment which has a substantial and long term (over 12 months) adverse affect on your ability to carry out day to day activities.

Do you consider yourself disabled? Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> 01 Visual <input type="checkbox"/> 03 Mobility <input type="checkbox"/> 05 Other Medical <input type="checkbox"/> Epilepsy <input type="checkbox"/> Diabetes <input type="checkbox"/> Asthma <input type="checkbox"/> Heart Condition <input type="checkbox"/> 07 Mental ill health <input type="checkbox"/> 09 Profound/complex	<input type="checkbox"/> 97 Other - please specify <input type="checkbox"/> 02 Hearing <input type="checkbox"/> 04 Other physical <input type="checkbox"/> 06 Emotional/behavioural <input type="checkbox"/> 08 Temporary disability <input type="checkbox"/> 90 Multiple <input type="checkbox"/> 97 Other - please specify	Do you have a learning difficulty? Yes <input type="checkbox"/> No <input type="checkbox"/> <input type="checkbox"/> 01 Moderate learning difficulties <input type="checkbox"/> 02 Severe learning difficulties <input type="checkbox"/> 10 Dyslexia <input type="checkbox"/> 11 Dyscalculia <input type="checkbox"/> 19 Other specific learning difficulties <input type="checkbox"/> 90 Multiple learning difficulties <input type="checkbox"/> 97 Other - please specify
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Do you have an Education, Health & Care Plan (EHCP)? Yes No
 If yes, please forward a copy with your application.

Access Arrangements in Examinations - please tick if you have received any support in the past:

Extra time <input type="checkbox"/>	Scribe <input type="checkbox"/>	Coloured paper <input type="checkbox"/>	Other; please specify:
Reader <input type="checkbox"/>	Use of coloured overlay <input type="checkbox"/>	Use of laptop <input type="checkbox"/>	

Household / Technology Access (For access to Virtual Online Learning if required)

Do you have access to a device such as a laptop or pc within your household? Yes No
 Do you have access to the internet at home? Yes No

Criminal Convictions

Do you have any criminal convictions? Yes No

If you do not tick either the 'Yes' or 'No' box, we will contact you to get this information and this will delay your application. You must tick 'Yes' if you have a conviction **unless** it is:
 a) A motoring offence that you received a fine or three penalty points for, OR
 b) A spent sentence (as defined by the Rehabilitation of Offenders Act 1974)
 Please be aware that for certain courses, particularly in teaching, health and social care, you must tell us about ANY criminal conviction(s), including spent sentences and cautions. If you are serving a prison sentence you must tick the 'Yes' box. If you are convicted of a criminal offence after you have enrolled, you **MUST** let us know immediately. If you are not sure whether to tell us about a previous conviction you should get more advice from your Citizens Advice Bureau. In line with the College safeguarding procedure if you declare a conviction we will need to complete a risk assessment form before we can process the application any further.

Safeguarding - The College's designated Safeguarding Officer is Debra Baldwin

Who do you live with? My mother and/or father I live on my own Another adult (i.e. foster carer, older sister/brother)

Equality and Diversity

Please help us monitor our Equality and Diversity policy by ticking the appropriate box. I consider my ethnic origin to be:

<input type="checkbox"/> 41 Bangladeshi	<input type="checkbox"/> 42 Chinese	<input type="checkbox"/> 34 Any other white background
<input type="checkbox"/> 39 Indian	<input type="checkbox"/> 37 White and Asian	<input type="checkbox"/> 98 Any other ethnic group
<input type="checkbox"/> 40 Pakistani	<input type="checkbox"/> 36 White and Black African	<input type="checkbox"/> 99 Not known/not provided
<input type="checkbox"/> 43 Any other Asian background	<input type="checkbox"/> 35 White and Black Caribbean	<input type="checkbox"/> 38 Any other mixed/multiple ethnic background
<input type="checkbox"/> 44 African	<input type="checkbox"/> 31 White British	<input type="checkbox"/> 46 Any other Black/African/Caribbean background
<input type="checkbox"/> 45 Caribbean	<input type="checkbox"/> 32 Irish	
<input type="checkbox"/> 47 Arab	<input type="checkbox"/> 33 Gypsy or Irish Traveller	

How did you hear about Ludlow College and the course(s) for which you are applying?

Please tick one box only

<input type="checkbox"/> School/Careers Advisor (B)	<input type="checkbox"/> Information Day (F)	<input type="checkbox"/> Prospectus (G)
<input type="checkbox"/> Exhibition/Roadshow (O)	<input type="checkbox"/> Advertising (I)	<input type="checkbox"/> Course Tutor (J)
<input type="checkbox"/> Courses Leaflets (H)	<input type="checkbox"/> Student (L)	<input type="checkbox"/> Employer (M)
<input type="checkbox"/> Friends/Relatives (K)	<input type="checkbox"/> Website (A)	<input type="checkbox"/> Social Media (S)
<input type="checkbox"/> Careers Convention (C)	<input type="checkbox"/> Visit to School (D)	<input type="checkbox"/> Other (N)

Signature

All applicants will be interviewed. All courses are offered subject to adequate demand.

Applicants Signature:

Date:

Under the Data Protection Act of 1998 we need your consent before we can process and store your information. By signing this form you are consenting to the personal data you supply being used to: (1) Process your application (2) Investigate and provide the correct level of support that may be required by you. We may share information with your previous educational establishment, local authorities and government organisations as legally required. We do not share your information with any non-relevant third parties.

For learners under 18, the College values the support of parents and guardians

Name(s) of parent(s)/guardian(s) for contact (Block Capitals) please state Mr/Mrs/Mr & Mrs:

Parent(s)/guardian(s) email address:

Please Note: If you do not wish us to contact them regarding your application, please discuss this at your interview.

What happens next...

Return the completed form to the address below by post or in person.

The information contained on this form will be used to process your application and to keep you informed of courses at HL College. If you wish to receive future mailings from us please tick this box
Please visit www.ludlow-college.ac.uk for the privacy policy

OFFICE USE ONLY**Overseas Learners (UK Border Agency)**

To study: (Must study a full-time programme if HLC is sponsor)	
To study: (in addition to main studies with other sponsor)	
Sufficient funds to cover cost of course and living expenses:	

Learners not Ordinarily Resident in UK or EEA

Indefinite Leave to Enter, Remain, Right of Abode or Refugee status	
Naturalisation or Registration as British Citizen:	
Spouse/Civil Partner of 'settled' UK, EU or EEA Resident: (lived in UK more than 1 yr and married more than 1 yr)	
Asylum Seeker	
Accompanying parents or the child of one of the above categories:	

**Overseas Learners (UK Border Agency)
- Office use only**

Passport: photocopy every page of original signed and dated by staff member (will be shredded at end of course)

**Learners not Ordinarily Resident in UK or EEA
- Office use only**

Passport Number:	
Visa Number:	
Visa Type:	
Visa Expiry Date:	
Staff Signature	

If you have problems completing your application form please call our Admissions Team on 0800 032 1986

Please complete and return the form to the **FREEPOST** address below. Please write address clearly.
FREEPOST RTKT-SLSZ-ACBL, Herefordshire & Ludlow College Admissions Office, Folly Lane, Hereford HR1 1LS

Fax: 01432 365 395 web: www.ludlow-college.ac.uk email: enquiries@hlcollege.ac.uk

[For Office Use Only]

Date on system:	Initials:
Inputted to EBS:	Initials: