

Application Form

To be used to apply for postgraduate and part-time courses only, full-time undergraduate applications must be made through UCAS at www.ucas.com



University of
Bedfordshire

Please ensure all sections are fully completed

1 Personal details

Title	Surname/family name (BLOCK CAPITALS)
First name(s)	
Previous surname (if changed)	
Gender: M / F	Date of birth
Correspondence address	
	Postcode
Contact telephone no.	Mobile telephone no.
Email	
Home address (if different)	
	Postcode
Home telephone no.	
Email	
Do you have any criminal convictions? Yes <input type="checkbox"/> No <input type="checkbox"/>	

2 Details of course(s) you wish to attend

Course title	Start date	Mode of study Full-time/sandwich/part-time/ other (please specify)	Stage (ie Year 1, Year 2)

3 Fee status and additional supporting information

Please attach a copy of your current passport and, where applicable, any Home Office documentation

Country of birth	Nationality
Country of permanent residence	
Applicants not born in the European Union please state Date of first entry to the EU:	Date of most recent entry to the EU:
Date from which you have been granted permanent residence in the EU:	

Payment of fees

Who is expected to pay your fees? (Research Council, Local Education Authority (LEA), yourself, family member, employer, other):

If an LEA, which one?

Ethnic origin (please tick one):

White Black Caribbean Black African Black other Asian Indian Asian Pakistani
Asian Bangladeshi Asian Chinese Asian other Mixed Other Prefer not to say

Have you previously studied at the University of Bedfordshire (or Luton/DMU Bedford)? YES / NO _____

If yes, please provide details of the course (title) _____

Former student reference number _____

If you have Qualified Teacher Status please give us your Teacher reference number _____

4 Work experience

Give details of work experience, training and employment. Continue on a separate sheet if necessary.

Job title	Name of Organisation	Full- or part-time	From (mm/yy)	To (mm/yy)

5 Last two educational establishments attended

Give names and addresses of the last two educational establishments which you attended.

Establishment	Full- or part-time	From (mm/yy)	To (mm/yy)

6 Examinations

Please list results, including those pending, and attach photocopies of your certificates or transcripts.

Level eg GCSE/Degree	Subject	Date (mm/yyyy)	Institution	Result

7 Additional needs

Please indicate if you have a disability:

No disability Autistic Spectrum Visual Impairment Hearing Impairment Long-term Health
Mental Health Dyslexia Wheelchair User Other disability not listed Multiple disability

Please give further details of any support needs which might necessitate special arrangements or facilities:

8 Names of referees

Please give the names and contact details of two people who can comment on your suitability for this course, which could include a teacher, an academic tutor, current employer, work experience co-ordinator.

Name	Name
Organisation	Organisation
Telephone	Telephone
Fax	Fax
Email	Email
Relationship to you	Relationship to you

You will need to supply references from both the referees given above with your application, which should be on their organisation's headed paper and dated within the last month.

9 Further information

Please use this section to tell us about yourself and your reasons for wanting to study this course.
You may prefer to attach a separate statement.

10 Declaration and submission

We expect you to submit a complete and comprehensive application at the point of first submission. This will enable us to properly assess your suitability for the course. It is therefore in your best interests to provide us with accurate information and to ensure that you are fully informed about the course you are applying for and the commitments you would be making if you become a student here, and to ensure that you have attached copies of your qualifications and two suitable references. By signing your application you are confirming that the information provided on this form is complete and correct.

I confirm that, to the best of my knowledge, the information given in this form is correct and complete.

Applicant's signature _____ Date _____

IMPORTANT NOTE

The University of Bedfordshire will take all reasonable steps to provide the educational service set out in its prospectuses. Should industrial action or other circumstances beyond the control of the University of Bedfordshire interfere with its ability to provide such a service, the University of Bedfordshire will take reasonable steps to minimise the resultant disruption. The University of Bedfordshire does not undertake any absolute obligation whatsoever to provide an educational service in the manner specified in its prospectuses or in any other document, nor does it undertake any other obligation in respect of the provision of an educational service which is more onerous than the obligations set out therein.

Should you become a student of the University of Bedfordshire, this notice shall be a term of any contract between yourself and the University. Any offer of a place made to you by the University of Bedfordshire is made on the basis that in accepting such an offer you signify your consent to the incorporation of this notice as a term of any such contract.

Notes for guidance

General

Before completing the form, **please ensure that you read these notes carefully.** You should also read the current University of Bedfordshire literature relating to the course(s) in which you are interested. The University's regulations are to be found at www.beds.ac.uk/aboutus/quality/regulations.

Students with Experience

The University of Bedfordshire welcomes applications from students with experience, including those who do not have conventional qualifications for admission to higher education in the UK. Full account is taken of relevant experience and other educational achievements.

The Data Protection Act 1998

The information which you give on your form will be used for the following purposes:

- To determine your eligibility for entry to the University of Bedfordshire.
- To enable the University of Bedfordshire to compile statistical reports.
- To enable the University of Bedfordshire to initiate your student record.
- To share information with government departments (eg immigration office), local authorities and other bodies to prevent possible fraud and to enable them to carry out their functions.

Section 1 Personal details

Complete this section in BLOCK CAPITALS.

Section 2 Details of the course(s) you wish to attend

If you wish to indicate an order of preference for your course choices you may do so. If you do not indicate an order of preference then it will be assumed that you have none.

Section 3 Fee status

Please state your country of permanent residence and give details of who you expect to pay your fees for the proposed course.

Section 6 Examinations

Enter the exact subject name used by the examining body and the name of the examining body in full. If you have qualifications obtained outside the UK, you should give details of all examinations taken as preparation for entry to higher education (eg School and Higher School Certificate, Apolytirion, Baccalaureat). Applicants with qualifications obtained in a language other than English must attach a certified English transcript to the form.

Section 7 Additional needs

Describe your condition and, where it is not obvious, indicate whether you have special needs.

Please return the completed form to:

**Admissions
University of Bedfordshire
Park Square
Luton
Bedfordshire
LU1 3JU
England**

**Admissions
University of Bedfordshire
Polhill Avenue
Bedford
Bedfordshire
MK41 9EA
England**

**Fax: +44 (0)1582 489323
Email: admission@beds.ac.uk**

www.beds.ac.uk