

Application for:

internationaladmissions@roehampton.ac.uk

- International Foundation Certificate Media Pathway
- International Foundation Certificate Business Pathway
- International Foundation Certificate Arts and Humanities Pathway
- International Foundation Certificate Open Pathway
- International Foundation Certificate **Fast Track** Media Pathway
- International Foundation Certificate **Fast Track** Business Pathway
- International Foundation Certificate **Fast Track** Arts and Humanities Pathway
- International Foundation Certificate **Fast Track** Open Pathway

Start month and year:

January/September 201__


1. TITLE/NAME/ADDRESS

Family name

First name(s)

Contact address

Home address (if different from contact address)



**COLLEGE
CONTACT.COM**

College Contact GmbH
Hanauer Landstrasse 151-153, 60314 Frankfurt am Main (Germany)
Phone: +49 69 907 2007 30
Email: beratung@college-contact.com
Web: https://www.college-contact.com

Telephone number

Mobile number

E-mail

This application form must be completed in English, *personally*, by the applicant. Please write clearly and complete all sections if possible. Please supply the following documents:

- A reference from a teacher who knows the applicant well
- A certified copy of the applicant's school record
- A certified copy of a transcript of any further studies
- A document certifying the applicant's level of English language
- The disability and ethnicity form to be found at <http://www.roehampton.ac.uk/admissions/DA2.pdf>

2. PERSONAL DETAILS

Male/Female (M/F) Date of birth

Area of permanent residence

Country of birth

Nationality

Applicants not born in the UK, state date of last entry in the UK

Date from which you have been resident in the UK

| | |
|-------------------------------|-----------------------------------|
| OFFICE USE ONLY | FEE STATUS |
| HOME <input type="checkbox"/> | EU <input type="checkbox"/> |
| | OVERSEAS <input type="checkbox"/> |

3. STUDY PLANS

What degree do you want to do AFTER the International Foundation Certificate?

BA BSc Subject

4. QUALIFICATIONS ACHIEVED OR PENDING (Examinations you have taken or are going to take. If you do not have the results yet, leave the results column blank.)

Academic qualifications

| Name of School/ College/ University | Month/ Year | Awarding Body | Name of Qualification | Subject unit, module or component | Level | Result, Grade or Band |
|--|----------------|---------------|--------------------------|---|-------|--------------------------|
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5. AGENT'S CONTACT DETAILS (if you are applying through an agent)



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6. ENGLISH LANGUAGE QUALIFICATIONS

| Name of Qualification | Month/ Year | Awarding Body | Subject unit, module or component scores (e.g. scores for each section of IELTS or TOEFL test) | Overall score |
|--------------------------|----------------|---------------|---|---------------|
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7. DETAILS OF EMPLOYMENT

| Employer | Nature of work | Part-time or Full-time? | From (Month/ Year) | To (Month/ Year) |
|----------|----------------|-------------------------|--------------------|------------------|
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8. PERSONAL STATEMENT IN SUPPORT OF YOUR APPLICATION

(including reasons for applying and any other additional information)

9. PLEASE INDICATE HOW YOU FIRST HEARD OF THIS PROGRAMME

 **COLLEGE**
CONTACT.COM

9. DECARATION

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

Applicant's Signature

Date

London

DA2 - Disability and ethnicity

This form will be detached by the University and will not be used in the selection process.

Part 1 - Disability

Roehampton University aims to support students with disabilities or specific learning difficulties to the best of its ability.

Please tick the box below if you wish to record that you have a disability, or a specific medical condition:

- | | |
|--|---|
| <input type="checkbox"/> Dyslexia | <input type="checkbox"/> Asperger's Syndrome/Autism |
| <input type="checkbox"/> Deaf/hard of hearing | <input type="checkbox"/> Wheelchair user |
| <input type="checkbox"/> Mobility difficulties | <input type="checkbox"/> Mental health difficulties |
| <input type="checkbox"/> Blind/partially sighted | |
| <input type="checkbox"/> An unseen disability (e.g. diabetes, epilepsy, asthma) please specify _____ | |
| <input type="checkbox"/> Any other please give details: _____ | |

I agree to the information given above to be passed on by Learning Support as necessary. This will enable them to liaise with your Academic School to best support you in your studies.

Part 2 - Ethnicity

In order to help the University ensure that its equal opportunities policy is being carried out effectively you are asked to provide the following information:

Please tick the box that best describes your ethnic origin:

a) Asian and Asian British

Indian Pakistani Bangladeshi

Other Asian background (please specify) _____

London

b) Black and Black British

Black Caribbean Black African

Other ethnic background (please specify) _____

c) Chinese, Chinese British or other ethnic group

Chinese Other Asian background
(please specify) _____

d) Mixed and mixed British

White and Black Caribbean White and Black African White and Asian

Other mixed background (please specify) _____

e) White and White British

English Scottish Welsh Irish

Any other white background (please specify) _____

I consent to the information given in this supplement being stored electronically within Roehampton's Student Information System. I understand that strict rules on security and confidentiality of data will be observed and the provisions of the Data Protection Act 1998 will apply on the use of and access to information. This consent will cover the period of my studies at the University unless it is withdrawn by me in writing.

Name _____ Date _____

Signature _____