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For office use only

Study Abroad Undergraduate Programme application form

Please complete this from if you wish to apply for our Study Abroad Programme. Please type or write clearly in block capital letters using black ink in the spaces provided and tick the boxes as appropriate.

1. Your personal	details		
Title (e.g. Mr, Ms, Dr etc))	Gender Male	Female
Last name			
First name(s)			
Date of birth	day month year		
Address	Home	Correspond	dence
Line 1		Сопоэропо	
Line 2			
Line 3			
City			
Postcode (UK Only)			
Country			
Email			
Telephone numbers (pl	lease include full country and area code)		
Daytime	Evening	Мо	obile
2. Your proposed	I nroaramme of study and	degree choice	
	d programme of study and	degree critice	
Which award do you want to study for?	Certificate (1 semester)	Diploma (2 semesters)	
Which award do you			
Which award do you want to study for? When would you	Certificate (1 semester)	Diploma (2 semesters)	
Which award do you want to study for? When would you like to start? Course title	Certificate (1 semester) September	Diploma (2 semesters) January**	
Which award do you want to study for? When would you like to start? Course title	Certificate (1 semester)	Diploma (2 semesters) January**	
Which award do you want to study for? When would you like to start? Course title	Certificate (1 semester) September	Diploma (2 semesters) January**	
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3. Nationality				
Country of birth (the country where you were born)				
Nationality (the country for which you are entitled to hold a passport)				
Country of domicile (the country you live in)				
Do you require a student visa to study in the UK?				
If you answer yes to the above question please provide a copy of your passport.				
Have you previously studied in the UK? Yes No				
			I	
Course title	Name of Institution/School/ University	Course Start/ End Date	Level, e.g BA, BSc, MA	Type of visa (please include copies)
When did you first enter the U Are you currently in the UK?	K?	No No		
If yes, what is your immigration		INO		
Have you ever been refused a		Yes	No If yes,	please provide refusal documentation
Have you ever been refused e		Yes	No If yes,	please provide refusal documentation
Have you ever been subject to				
from the UK by the Home Office, due to overstaying Yes No leave to remain?				
If yes, please provide details including the date of your				
notice or removal, including details of any sanctions.				
Please note that if you intend to study for less than 6 months you may be able to enter the UK on a short term visitor visa. Details can be found here				
www.gov.uk/study-visit-visa/overview				
4. English language p	proficiency			
To enrol on the course, you are you are waiting for your results	e required to have an IELTS cer	tificate from an app	roved centre. You	can apply for the course while
Have you taken your IELTS test?				
If yes, please provide the details of your award below and include the IELTS certificate with your application.				
Overall score Date of award				
Listening	Reading	Writing		Speaking
Would you like to be considered for a Sheffield Hallam University Yes No				
Pre-sessional English Language course?				
For more information visit www.shu.ac.uk/tesol For EU students, local equivalent qualifications may be acceptable. For further details, email studyabroad@shu.ac.uk				

5. Current Education

Phone number (Including full country and area code)

+49 69 907 2007 30

Please give details of your current institution and attach your year 1 transcripts

The Study Abroad programme is only open to those students who have already completed 1-2 years of an undergraduate programme in their home country and who intend to return and complete their studies after their time in the UK

Institution	Current course title	Modules completed	Level achieved
(name and address)		(Include credit value)	
6. Criminal convicti	ons		
		or an offence against the person, which	is of a violent or sexual
The University needs to know whether you have a conviction for an offence against the person, which is of a violent or sexual nature, or, a conviction for an offence involving unlawfully supplying controlled drugs or substances, where the conviction concerns criminal drug dealing or trafficking. If you have such a conviction, please mark the box with an X. Your conviction will not affect the academic consideration of your application.			
	nay require all applicants to undert	ake a Disclosure and Barring Service (D	BS) check irrespective of
Do you have any relevant cr	iminal convictions?	Yes No	
7. Financial informa	ition		
How do you intend to pay fo	or your module fees?		
Personal/family resources Employer Sponsorship Scholarship Government body			
If you are not a self-funding	applicant, please give the name a	nd address of your sponsor below.	
Name of sponsor			
Address			
_			
Postcode			
Country			
Email address Phone number (Including full country and area code)			
Fax number			
All module fees are to be pa	id prior to enrolment on the study	abroad programme	
8. Application Supp	ort		
If you have had support with your application from a study abroad organisation or an education agent, please add their details below:			
Name	College Contact Gmk	DH	
Address	Hanauer Landstrasse	2 151-153	NIICC
			<u> DLLEGE</u>
	0314, Frankfurt am	n Main CON	NTACT.COM
	Germany		
Email address	peratung@college-co	ontact.com	

9. Declaration			
The information you supply on this form will be used by Sheffield Hallam University in accordance with the Data Protection Act 1998 and other applicable legislation. The University will use the information to process your application and to provide any relevant further information by post, email or text. It will also be used to support the University's marketing activities.			
Please tick if you wish to receive further information by:			
Post Text Phone			
The information you supply on this form will be used by Sheffield Hallam University in accordance with the Data Protection Act 1998 and other applicable legislation. The University will use the information to process your application and to provide any relevant further information by post, email or text. It will also be used to support he University's market research activities.			
Please tick if you wish to receive further information by:			
Post Text Email Phone			
If at any time you change your mind and you would like the University to stop sending such information, please contact the Department of Marketing, Sheffield Hallam University, Sheffield S1 1WB or email marketing@shu.ac.uk			
The information from your application form will be used to set up a student record on the University's student information (SI) system. Where required this information may be shared with the government or their respective agents to check the accuracy of personal information provided by students against external data sources such as the Higher Education Statistics Agency (HESA), or the Learning Skills Council Individual Learner Record (LSC ILR), returns. The University may also contact other institutions to confirm previous qualifications obtained.			
In order to prevent and detect fraud and comply with regulations for international students we reserve the right to, or may be required to, share this information with external organisations such as the police, the Home Office, the Foreign and Commonwealth Office, the UK Visa's and Immigration and local authorities.			
The University is required to check international students' eligibility to study in the UK. This may require the University to liaise with and exchange data with the Home Office or related Government agencies in relation to students' visa history and/or immigration history, during the admissions process.			
I consent to the Home Office, or related Government agency, releasing information about my immigration history to the University for these purposes. This may include sensitive personal data about any orders, warnings, convictions or other penalties relevant to Immigration. (Please note that failure to provide consent by ticking the above box may delay the processing of your application.)			
Please read and sign the declaration statement. I confirm that, to the best of my knowledge, the information given in this form is true, complete and accurate and no information requested or other material information has been omitted. I give my consent to the processing of my data by Sheffield Hallam University. I understand that any offer of a place on the above course is subject to my acceptance of the University's terms and conditions (visit www.shu.ac.uk/students/terms), which I have read. I understand what they say, and I agree to abide by the conditions set out there. I accept that if I do not fully comply with these requirements, Sheffield Hallam University reserves the right to cancel my application and I shall have no claim against Sheffield Hallam University in relation to this application.			
Applicant's signature Date			
To be completed by the applicant's parent or guardian if the applicant is under 18 years of age: I confirm I have read, understood and agree to the declaration above on behalf of the applicant.			
Parent/ Guardian signature Date			
If you are completing the application form electronically, please type your full name into the signature box			

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Please note this section of the application will not be used in the consideration of your application

10. Disabilities and support needs

The University welcomes students with disabilities, but we need to know your needs so that we can make appropriate arrangements. If you have a special need, please tick the most appropriate box. The Disabled Student Support Team will contact you to discuss how to help you.

This information will remain strictly confidential.

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Do you consider yourself to have a disability	Yes No		
Type of disability			
Specific learning disability e.g. dyslexia, dyspraxia etc. Blind/partially sighted			
Deaf.hearing impairment Wheelchair user/mobility difficulty			
Autistic spectrum disorder/Asperger's syndrome Mental health difficulty			
Multiple disabilities Mental realth dimedity Personal care support			
Multiple disabilities Personal care support			
Unseen disability e.g. diabetes, cancer, epile	psy, asthma etc please specify		
Other please specify			
	11 f 41 4 1 - 1 - 1 - 1 - 1 -		
On a separate sheet, please provide further detail	ils of the nature of your disability and the supp	ort you would require.	
Do you agree that this information can (where ap	plicable) be shared with the course leader in o	rder to ensure the provision	
of suitable support ? Yes No			
11. Equal opportunities monitoring	g		
Ethnic origin			
White	Asian or Asian British – Pakistan	Mixed – white and Asian	
Gypsy or traveller	Asian or Asian British – Bangladesh	Other mixed background	
Black or black British – Caribbean	Chinese	Arab	
Black or black British – African	Other Asian background	Other ethnic background	
Other black background	Mixed – white and black Caribbean	Other curine background	
Asian or Asian British – Indian	Mixed – white and black African		
Religion			
Baha'i faith	Muslim	No religion	
Buddhist	Sikh	Pagan	
Hindu	Any other religion or belief	Christian	
Jewish	Prefer not say	Other	

12. Terms and conditions

For the University's terms and conditions please visit: www.shu.ac.uk/students/terms

13. Final check List		
1. Please check you have supplied all the required information on this checklist		
Complete all sections of the application form Sign the declaration (page 6, section 11)		
Attach the following supporting documents to your application		
Full transcripts of all your relevant academic qualifications translated into English (Including transcripts of year 1 of undergraduate study, if you have these available)		
IELTS certificate (if you have already taken the test or other English qualifications)		
A copy of the personal details page of your passport		
A copy of any UK visas and evidence of previous academic study in the UK (if applicable)		
A copy of any visa refusal documents (if applicable)		
2. Please note the following deadlines:		
1 August for September study, 1 December for January study		
Applications received after the deadline cannot be considered		
3. Please send your application and supporting documents to		
Email: Fax: specialistroutes@shu.ac.uk +44(0)114 225 5555		
Address: Admissions - Study Abroad application, Surrey Building, City Campus, Howard Street, Sheffield, S1 1WB, UK		