UCLAN FOUNDATI**ON**CAMPUS APPLICATION FORM

Apply ONLINE at www.foundationcampus.com or return this form to:
Admissions Office, FoundationCampus, Kett House, Station Road
Cambridge, CB1 2JH, United Kingdom
Tel: +44 (0)1223 345698 Fax: +44 (0)1223 346181 Email: admissions@foundationcampus.com

Please write neatly using BLOCK CAPITALS in black ink or typescript. Incomplete application forms submitted without ALL the supporting documents will delay the decision process.

1. PERSONAL DETAILS							
Title (Mr/Mrs/Miss/Ms etc)							
First name(s)	Family name						
Date of birth (dd/mm/yy)	Age on entry						
Nationality (as passport)	Male/Female						
Country of permanent residence							
Home address	Correspondence address (if different)						
Postcode	Postcode						
Country	Country						
Mobile (incl. country code)	Mobile (incl. country code)						
Telephone (incl. country code)	Telephone (incl. country code)						
Student email							
Do you have any criminal convictions? \square Yes \square No (Your enquiry cannot be processed if you do not complete this section)							
2. DISABILITY/SPECIAL NEEDS							
Foundation Campus will conduct a needs analysis with you to determine any support that may be required, and to ensure that your personal needs can be met wherever possible. However, failure							
to disclose a specific requirement may result in us not being able to meet your needs.							
Please state any condition which might necessitate special arrangements or facilities. Consult the Notes for guidance at www.foundationcampus.com/en/about/tandc							
NOTES (FOR OFFICE USE ONLY)							
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3. DETAILS OF COURSE(S) FOR WHICH YO	U WISH TO A	APPLY						
Please give details of the Foundati on Campalongside the proposed year of study.	pus program	me for which you are apply	ving. Please also	state the subject	and study level	you are aiming for (undergraduate or Master's degree)		
University degree you wish to progress to	e.g. – BA (Ho	ons) Business Management	t					
Foundati on Campus programme: Undergraduate Fou								
Date you want to start the programme: Month/Year		I Sept □ Jan □ April □ J I 2014 □ 2015	une The numb	The number of terms you wish to study:				
4. ACADEMIC HISTORY								
Have you ever studied in the UK before? I	□ Yes □ N	o If you answered yes to	the question, plea	ase provide the f	ollowing details	and a copy of any previous UK visas:		
Name of school / institution (in full):								
Date of study:	Course of study:							
5. DOCUMENTS								
Please enclose the following and tick to confirm you have included them. ☐ Completed and signed appli				ation form Copies of transcripts (with certified English translated copies if in any other language) Copy of passport and copies of any previous UK visas				
6. USE OF AGENTS								
Have you used an educational agent during If no, please proceed to section 7. If yes, ple www.foundationcampus.com				e Conditions of E	Inrolment which	n can be found on the Foundati on Campus website at		
Name of agent (in full):		Student Connection International						
Name of contact person at agency and em	ail address:	ddress: A.E.Q Siddique - student.cnintl@gmail.com						
Agent address (in full):								
7. HOW DID YOU HEAR ABOUT US?								
Please indicate how you heard of these cou	rses (Please	tick) 🗖 Agent	☐ Exhibition	☐ Family	☐ Internet	Other (please specify)		
8. DECLARATION								
understood and agreed to the terms and conditions and application and during my course of study. If you do not h	fees of study at U nave access to the re, Cambridge Ed	JCLan Foundati on Campus as outlin e website or would like a written co ducation Group (CEG) will collect, k	ed on the Foundati on C py of the conditions of eep and otherwise pro	Campus website www. enrolment, you can re cess personal data, in	foundationcampus.c equest these from Fo cluding sensitive per	copies. I understand that by completing and returning this declaration I have read com/en/about/tandc and agree to comply with UKBA regulations at the time of bundationCampus Central Admissions at admissions@foundationcampus.com resonal data that relates to you and your circumstances. This will include your namerisa. finances and fees.		
We will keep this information secure at all times and we	will share it with your health or t	iin CEG as necessary to run our bus	iness, deliver your edu	ıcation and ensure yo	ur safety. We will als	o release this information where it is legally required or lawful to do so, or in the d also where necessary with our academic partners such as universities. Some of		
Do you consent to your personal data being stored, proce Do you consent to your sensitive personal data including Do you consent to the reasonable use of your details and	health, welfare,	nationality, ethnicity, religious and		d, processed and relea	ased in this way? 🗖	A.E.Q. Siddique Managing Partner		
Signature of Applicant				Date		Student Connection International		
Parent or Guardian Signature				Date				

If applicant is not the fee payer or is under 18