## LONDON FOUNDATI**ON**CAMPUS APPLICATION FORM

Apply ONLINE at www.foundationcampus.com or return this form to: Admissions Office, Foundati**on**Campus, 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.

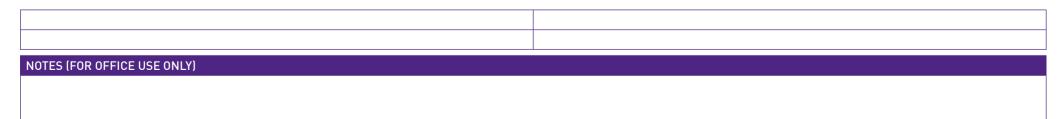
1. PERSONAL DETAILS	
Title (Mr/Mrs/Miss/Ms etc)	
First name(s)	Family name
Date of birth (dd/mm/yy)	Age on entry
Nationality (as passport)	Male/Female
Country of permanent residence	
Home address	Correspondence address (if different)
Postcode	Postcode
Country	Country
Mobile (incl. country code)	Mobile (incl. country code)
Telephone (incl. country code)	Telephone (incl. country code)
Student email	

Do you have any criminal convictions? 🛛 Yes 🖓 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



## 3. DETAILS OF COURSE(S) FOR WHICH YOU WISH TO APPLY

Please give details of the Foundation Campus programme for which you are applying. Please also state the subject and study level you are aiming for (undergraduate or Master's degree)

alongside the proposed year of study.	amp de progre			p.yg			a are annig i	en (ander gi addate en i laeter	e aeg. ee,	
University degree you wish to progress to e.g. – BA (Hor			ons) Business Management							
		0	] Undergraduate Foundation Programme ] English Language Preparation Programme			al Diploma Progra	mme	□ Master's Foundation Prog	jramme	
			□ Sept □ Jan □ April □ June □ 2014 □ 2015			f terms you wish to	o study:			
4. ACADEMIC HISTORY										
Have you ever studied in the UK before	? 🗆 Yes 🗆	No If you	answered yes	to the question, plea	se provide the f	ollowing details an	nd a copy of ar	ıy previous UK visas:		
Name of school / institution (in full):										
Date of study:	Course of study:									
5. DOCUMENTS										
you have included them.						<ul> <li>Copies of transcripts (with certified English translated copies if in any other language)</li> <li>Copy of passport and copies of any previous UK visas</li> </ul>				
6. USE OF AGENTS										
Have you used an educational agent dur If no, please proceed to section 7. If yes, www.foundationcampus.com					Conditions of E	Enrolment which ca	an be found or	ו the Foundati <b>on</b> Campus web	site at	
Name of agent (in full):		Student	t Connection Inf	ternational						
Name of contact person at agency and	email addres	ss: A.E.Q.	Siddique - stude	ent.cnintl@gmail.com	1					
Agent address (in full):		Niketon	Heights, 2A, 2	nd Floor, House 1334	A, Road 3, Block	A, Niketon, Gulsha	an 1, Dhaka 12	212, Bangladesh		
7. HOW DID YOU HEAR ABOUT US?										
Please indicate how you heard of these	courses (Plea	ase tick)	🗖 Agent	□ Exhibition	🗖 Family	🗖 Internet	🗖 Other (p	lease specify)		
8. DECLARATION										
declare that I am applying to FoundationCampus as understood and agreed to the terms and conditions a application and during my course of study. If you do r	and fees of study not have access to	at London Found o the website or	dati <b>on</b> Campus as ou would like a written	utlined on the Foundati <b>on</b> C a copy of the conditions of e	ampus website www nrolment, you can re	v.foundationcampus.com equest these from Found	n/en/about/tandca dati <b>on</b> Campus Cer	and agree to comply with UKBA regulat htral Admissions at admissions@founda	tions at the time of ationcampus.com	
n order to deliver your education and protect your w and contact details, and those of your parents, guard									will include your name	
We will keep this information secure at all times and event of a medical emergency if it is necessary to pro our data transfers may transfer your data to other co	otect your health ountries.	or the health of	others. We will prov							
Do you consent to your personal data being stored in	rocessed and rel	eased by CEG in	this way? 🗖							

Do you consent to your personal data being stored, processed and released by CEG in this way? 🗖 Do you consent to your sensitive personal data including health, welfare, nationality, ethnicity, religious and other data being stored, processed and released in this way? 🗖 Do you consent to the reasonable use of your details and academic achievement to be used for marketing purposes? 🗖

Signature of Applicant	Date
Parent or Guardian Signature	Date
If applicant is not the fee payer or is under 18	

A.E.Q. Siddique Managing Partner Student Connection International