

Application form Please print in BLOCK LETTERS

(1) Personal

(I) Personal																
Title: Mr Mrs Miss Other																
Family name:	First name(s):															
Previous family name: (if applicable)																
Date of birth: DAY / MONTH / YEAR	Gender: ☐ Male ☐ Female															
Student address:																
Postcode:	Country:															
Home telephone:					Mobile telephone:											
Country of birth:					Skype ID:											
					окуре ід.											
Email:																
Country of passport held: Passport number:																
(2) Pathway area selection																
Undergraduate Pathway Areas		Postgraduate Pathway Areas														
☐ Stage 1: University Foundation	Stag	ge 2: Firs	t Year Deg	ree				Stage 1: Pre-Master's								
☐ Accountancy ☐ Accountancy									☐ Art and Design							
☐ Architecture, Art and Design	lies				Business											
☐ Built Environment Studies	Busi	ness			Law											
Business			and Financ	е	Management											
Economics and Finance		neering						□ Media								
Engineering	Marl	_														
Law	Tech	inology														
Marketing																
Technology																
Year of entry: ☐ January ☐ May/June ☐ September																
(This section must be completed, including desired m	ajor/spe	cialisatio	on, where	relevant)												
Your chosen degree:																
Todi Grobert degree.																
(3) Education details																
Prior education - highest level achieved																
Name of qualification (eg. 'A' Levels, Year 12, Bachelo	me of in		Grade	es (ite	mise in	: Date	of cor	npletion:								

(4) English proficiency	(6) Have you studied previously in the UK? ☐Yes ☐ No								
Please provide details of your English language qualification.									
IELTS (Score):	From: DAY / MONTH / YEAR To: DAY / MONTH / YEAR								
PTE Academic (Score):	Name of school/university:								
Other ('O' Levels, Cambridge):									
You must submit full academic transcripts/certificates and proof of English proficiency so that we can assess your eligibility for your selected study Pathway. If these documents are not submitted with this form, we will not be able to process your application. (5) Disabilities/special needs Please indicate in the next column whether or not you will need any additional support or facilities. We will pass this information on to our Student Services team who will liaise with you to support you through the admission process and determine whether we and the university can meet your study needs. □ I have no known learning/physical disability □ I have a specific learning/physical disability Please give further details below and if necessary attach further information to this form.	(7) Other information How did you hear about BCUIC? You may tick more than one box. Exhibition/seminar Internet Newspaper/magazine advertisement British Council Recommended by a BCUIC representative (agent) Recommended by a friend or relative Is your friend/relative a BCUIC student? Yes No Other:								
8) Application checklist and declaration We require the following section to be completed in order to process your applic Check that you have: Completed all sections of the application form Read and understood the Conditions of Enrolment, including the Fee and Refund Policy within the brochure or on the website	Check that you have attached: Certified copies of your academic transcripts Evidence of your English language ability if applicable A copy of your passport and/or visa								
any educational institution that I have attended. I also authorise BCUIC to supply admission, to government bodies and to parents/sponsors if required. I underst the BCUIC Payment and Refund Policy and accept liability for the payment of all	cellation of enrolment. I give permission for BCUIC to obtain official records from ly any relevant official records to educational institutions to which I am seeking tand that Course Fees are subject to review; I accept the conditions as laid out in I Course Fees as outlined within. I understand that living expenses in the United neet those costs. I hereby consent to BCUIC disclosing my personal information to C to the next stage of my studies; with regarding pathways and services offered by Navitas Ltd and its								
Signature:	Date: DAY / MONTH / YEAR								
Parent/Guardian signature: (if applicant is under 18 years of age)	Date: DAY / MONTH / YEAR								
Office use only	Agent contact details								
Representative Stamp	Agency name: Student Connection International								
	Agent Office Code:								
	Email: student.cnintl@gmail.com								
	Branch Office: Dhaka, Bangladesh								

Send your application to BCUIC

BCUIC Bournville Campus Linden Road Birmingham B30 2AE United Kingdom

A.E.Q. Siddique

Managing Partner

Student Connection International

