



Application Ref: / / /

Please complete in black ink

1. Personal details

Surname or family name _____

Other names in full _____

Male Married Date of birth

D	D	M	M	Y	Y

 Title (Mr/Mrs/Miss/Ms etc) _____

Home (Permanent) address _____

Postcode _____

Telephone _____ (Daytime) if different _____

Address for correspondence (if different from above) _____

Postcode _____ valid from _____ to _____

Telephone _____ Email address _____

Nationality _____ Country of birth _____

Country of permanent residence _____ Date of first entry to the United Kingdom, if appropriate _____

Special needs

Please tick relevant box if you have any of the following disabilities/medical conditions which might require special arrangements or facilities

1 Dyslexia 2 Blind/partially sighted 3 Deaf/hearing impairment 4 Wheelchair user/mobility difficulties 5 Need personal care/support
6 Mental health difficulties 7 Unseen disability eg diabetes, epilepsy, asthma Are you registered disabled? Yes No

Please give further details _____

2. Instructional course (leading to a Certificate, Diploma, or a Master's Degree)

Course name (as quoted in the postgraduate leaflet or prospectus) _____

Full-time Part-time Year of commencement: 200 / _____

3. Research

Faculty _____ Department _____

Topic or field of research proposed (if known) _____

Name of proposed supervisor/contact (if known) _____

Higher degree for which you wish to study eg MPhil, MPhil/PhD, MPhil(ResMeth), EdD, MRes, EngD: _____

Full-time Part-time Date of commencement _____ 200 / _____

4. Proposed options/Research topic

5. Higher Education

a. Degree/qualification already obtained

Name of University, Polytechnic or College

Degree/qualification title

Subject(s) studied

Entry date

Leaving date

Class/Grade

Language of instruction

b. Degree/qualification for which you are currently studying

Name of University, Polytechnic or College

Degree/qualification title

Subject(s) studied

Entry date

Approximate date of examinations

Date results expected

Language of instruction

If you have studied at a UK University in the past please give your HE Student identification number (if known) (in use from 1995/96)

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If you are domiciled in Scotland please give your SCOTVEC number

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6. Professional or other qualifications

7. English language competency

Is your first language English? Yes/No

If No please list any English language qualifications:

English language qualification held

Obtained at

Date

Grade

8. Details and dates of full-time employment

9. Funding

10. References

1. Name

2. Name

Position

Position

Address

Address

Email

Email

11. General

Have you applied for post-graduate study at this University before? Yes/No

If Yes give details

Are you applying for other courses at Southampton? (please state which)

Are you applying to other Universities? Yes/No

If Yes please give order of preference (including Southampton)

1.

2.

3.

Where did you first hear about the University or the course?

British Council

Former student

British Education Exhibition

Careers adviser

School/University

Article/advertisement (please specify)

Other (please specify)

12. Information Required for Specific Courses only

a. All applicants to Winchester School of Art (Including the Textile Conservation Centre)

Please enclose with your application a personal statement. Please see Guidance notes for details of the information to be included in this statement.

b. Applicants for MA European Fine Art/MA Sculpture/MA Fine Printmaking only

I enclose a wallet of _____ (no) colour slides of my work
I enclose a numbered list of slides with details of the work shown

13. Other Relevant Information

- a. Do you have any unspent criminal convictions (excluding motoring offences for which a fine and/or 3 penalty points were imposed) **Yes/No** *Please delete*

Please give details:-

- b. Please give details of any other relevant information e.g. publications on a separate sheet.

14. Signature

I declare that the information I have provided is accurate and no material information has been omitted. Any work submitted in support of this application is entirely my own. I consent to the university processing my application. I agree to abide by the University's rules and regulations, if accepted onto a course.

Signature _____

Date _____

15. Checklist

Please check that you have

- completed all sections of this form
- signed the form at section 14
- completed and enclosed Ethnic origin form (ref. UGDC-VS-PG)
- obtained and enclosed two references
- enclosed any supplementary information/work required for specific courses, as detailed in Section 12.

Please now return your form to:

the Admissions Office, University of Southampton, Southampton, SO17 1BJ, UK,

**or, if you are applying to the Faculty of Medicine, Health and Biological Sciences, to:
the Faculty Office, Medicine, Health and Biological Sciences, University of Southampton,
Southampton, SO17 1BJ,**

**or, if you are applying to Winchester School of Art (including the Textile Conservation Centre), to:
the Registry, Winchester School of Art, Park Avenue, Winchester, SO23 8DL.**