



University of the
West of England

For office use only

Application for Postgraduate and/or Professional Taught Programmes (not to be used for research programmes)

Please complete in black ink using block capitals

1 Programme title(s) Please list in order of preference

i _____

ii _____

iii _____

Would you like to study full-time or part-time or distance learning
(where available) Proposed entry date: month ___ year ___

2 Applicant details

Surname/Family name	Dr/Mr/Mrs/Miss/Ms <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
First/Given name	
Previous surname, if changed	Male <input type="checkbox"/> Female <input type="checkbox"/>

Age on 31 August in year of entry: years ___ months ___ Date of birth: day ___ month ___ year ___

Correspondence address (we will send all correspondence here, so it is important that you let us know of any change of address) _____ _____ _____	Home address (if different) _____ _____ _____
Postcode _____	Postcode _____
Telephone _____	Telephone _____
Mobile phone _____	Fax _____
Fax _____	E-mail _____
E-mail _____	

If you are disabled or have a medical condition please enter the appropriate code from the following list in the box.

0 None	6 Mental health difficulties
1 Specific learning difficulty (eg dyslexia)	7 Unseen disability (eg diabetes, epilepsy or heart condition)
2 Blind or partially sighted	8 Two or more of the above (please specify)
3 Deaf or hard of hearing	9 Disability, special need or medical condition that is not listed above (please specify)
4 Wheelchair user or mobility difficulties	
T Autistic Spectrum Disorder or Asperger's Syndrome	

Details of facilities / support required:

3 Tuition fee status

Country of birth

Nationality

Country of domicile or area of permanent residence

If you were born outside the European Union please give:

Date of first entry to the EU

day __ __ month __ __ year __ __

Date on which you were granted permanent residence in the EU

day __ __ month __ __ year __ __

Payment of tuition fees

Who will pay your fees if you are offered a place? *Please tick appropriate box*

Yourself Your employer

Your parent or guardian Other sponsor (*please state*)

Name and address of sponsor

Postcode

Telephone

Fax

E-mail

Please give details of any scholarships or grants you have:

already obtained

applied for

4 Education details

Please give name and address of school / college / university attended, including city and country, in chronological order since the age of 16

From

To

Full-time / part-time

Please give name and address of school / college / university attended, including city and country, in chronological order since the age of 16	From	To	Full-time / part-time

8 Referees

Please give names and addresses of two referees. At least one referee should be able to comment on your academic /professional ability. Please complete your personal details on the reference sheets and pass them to your referees for completion. The references should be returned direct to the Enquiry and Admissions Service.

Name _____	Name _____
Occupation _____	Occupation _____
Address _____	Address _____
_____	_____
_____	_____
Postcode _____ Telephone _____	Postcode _____ Telephone _____
Fax _____ E-mail _____	Fax _____ E-mail _____

9 Declaration

I confirm that the information given on this form is true, complete and accurate.

If the University of the West of England has reason to believe that I or any other person have given false information or have omitted any information requested in the instruction or application form or made any misrepresentation, the University will take whatever steps considered necessary to establish the authenticity of my application. I accept that if I do not fully comply with these requirements, the University reserves the right to cancel my application and I shall have no claim against the University.

Signature

Date

Please complete your personal details on the two reference sheets, and pass them to your referees for completion. Then return the application form, copies of transcripts/certificates and copies of academic papers, as appropriate, to:

**Enquiry and Admissions Service, University of the West of England
Frenchay Campus, Coldharbour Lane, Bristol BS16 1QY, UK
Telephone +44 (0)117 344 3333 Fax +44 (0)117 344 2810
Minicom +44 (0)117 344 3806 E-mail admissions@uwe.ac.uk**

10 How did you learn about UWE?

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Prospectus | <input type="checkbox"/> Friend | <input type="checkbox"/> Word of mouth | <input type="checkbox"/> UWE website |
| <input type="checkbox"/> Careers advice | <input type="checkbox"/> Advertisement | <input type="checkbox"/> British Council | <input type="checkbox"/> Studylink CD-ROM |
| <input type="checkbox"/> Employer | | | |
| <input checked="" type="checkbox"/> Other (please state) | | | |

11 Have you previously studied at UWE?

- Yes No

If 'yes' please give your:

UWE Student Registration number _____ Alumni number _____

The Data Protection Act 1998

The information which you give on your application form will be used for the following purposes only:

- To enable your application for entry to be considered.

- To enable the university to compile statistics, or to assist other organisations or individual research workers to do so, provided that no statistical information which would identify you as a person will be published.
- To enable the university to initiate your student record.



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Reference Sheet

Programme title:

Applicant's full name:

Address:

Date of birth:

Notes for the guidance of referees

The referee's report is an integral and important part of the selection process, and the information you give will help to guide admissions tutors in making their decisions.

In order that the University can evaluate the applicant's academic and intellectual capacity your reference should if possible cover:

1. Suitability for the programmes(s) applied for
2. Intellectual qualities including
 - a) development to date and previous examination performance with special reference to any factors which may, in your opinion, have adversely influenced the result
 - b) present performance
 - c) potential, including an assessment of the probable results of any pending examinations
3. Personal qualities
4. Career aspirations
5. Health and other personal circumstances relevant to the application
6. Athletic, social and other interests

Please ensure that the form is completed clearly in black ink.

Mature applicants

Referees may have difficulty in commenting on the academic abilities of mature applicants, who may not have any recent educational experience, and in these circumstances, referees may wish to confine their comments to matters listed under 1, 2c, 3, 4, 5 and 6 above.

Please fill in personal details, and send to your referee(s). Completed references should be returned to:

Enquiry and Admissions Service, University of the West of England, Frenchay Campus, Coldharbour Lane, Bristol, BS16 1QY, UK
E-mail Admissions@uwe.ac.uk Fax +44 (0)117 344 2810

CONFIDENTIAL STATEMENT BY REFEREE

Name of referee:

Post/occupation/relationship:

Address:

Telephone: _____ Fax: _____

Please use this side of the form only, within the frame. Please affix official stamp, where appropriate, at the end of the statement.

Name of applicant (block capitals or type)

.....

Signed:

Date:



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Equal Opportunities Monitoring Form

We use this information to monitor applications and equal opportunities.
It will not be taken into account in the admissions process.

Planning Statistics

Occupational background:

Please give the occupation of your parent, step-parent or guardian who earns the most. If he or she is retired or unemployed give the most recent occupation.

Alternatively, if you are aged 30 or over please give your own occupation

Ethnic origin:

Complete this section only if you have shown on the form that your area of permanent residence is in the UK.

Please choose from the ethnic origin categories printed here the one which you feel describes your ethnic origin and write its code in the boxes below.

--	--

White		Asian or Asian British	
British	11	Indian	31
Irish	12	Pakistani	32
White Scottish	13	Bangladeshi	33
Irish Traveller	14	Chinese	34
Other white background	19	Other Asian background	39
Black or Black British		Mixed	
Caribbean	21	White and Black Caribbean	41
African	22	White and Black African	42
Other black background	29	White and Asian	43
		Other mixed background	49
		Other ethnic background	80

Programme(s) applied for:

Name (optional):

Please return completed form to:

Enquiry and Admissions Service, University of the West of England, Frenchay Campus, Coldharbour Lane, Bristol, BS16 1QY, UK