



1. Personal Details: Please write in capitals and please complete all sections

First name	<small>Please note this should be your legal name</small>	Do you require a visa to live or study in the UK?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Preferred name		Normal country of residence	
Last name	<small>Please note this should be your legal name</small>	Name of parent/guardian/next of kin/carer – this should be the person you currently live with	
Date of birth		Next of kin relationship to you	
Age (as at 31 st Aug 2018)		Their day time tel no	
Gender (please tick box)	<input type="checkbox"/> Male <input type="checkbox"/> Female	Next of kin email	
Home address		Next of kin address	
Postcode			
Home telephone			
Mobile		Second next of kin details	
Email	<small>Please give us the email address you will continue to use through the summer to ensure you receive important information.</small>	Name:	
Your nationality		Relationship to you:	
		Their contact tel:	

2. School/College: (If you are already at Exeter College please complete the Internal Application form)

Which secondary school or college do/did you attend?
 Town:

Have you ever studied at Exeter College Yes No

If you are aged 17 or older on the 31/8/18 please tell us what you have done and where since 16 years old?

Have you completed any AS levels - if so where, which ones and what grades?

Why did you not continue to A2 levels?

3. Future interests/plans:

Why have you chosen to apply for the UAL Diploma in Art and Design (Foundation Studies) course?
Tell us about your interests, hobbies and any skills or experience you have that is relevant to the course.

Please continue on a separate sheet of A4 if necessary and attach to this form.

4. Do you have a criminal record or any outstanding court proceedings or are you on an Offenders' Register?

Yes No

Please give details

5. Do you have an agency or support worker?

(for example social worker, officer, supported housing, community psychiatric nurse, key worker or any other)

Yes No If yes, please give details:

Name	<input style="width: 100%;" type="text"/>
Agency	<input style="width: 100%;" type="text"/>
Email	<input style="width: 100%;" type="text"/>
Address	<input style="width: 100%;" type="text"/>
Telephone	<input style="width: 100%;" type="text"/>

6. Qualifications: Please tell us about your achieved, predicted or mock results

Level	Subject	Grade - Predicted	Grade - Actual (if known)	Date of results
	English Language			
	Maths			

Please tick here if you do not have/are not working towards any qualifications

Reference request

To referee (Head of Sixth Form / Course Tutor/Art Teacher)

Please provide a brief reference for each of the applicant's AS/A2 level subject or level 3 BTEC qualifications in the boxes below. For programmes like the Extended Diploma and IB please use the boxes to comment on their main areas of relevant study/specialism giving information about their abilities and suitability for the course.

Please note: unless you specify otherwise your comments may be quoted in subsequent UCAS references if appropriate.

Qualification and subject title _____ (eg A2 Fine Art) Predicted grade:
Qualification and subject title _____ (eg A2 Fine Art) Predicted grade:
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ALL REFEREES: Please comment on the applicant's temperament, character and attitude to work:

8. Support requirements:

We welcome all students and encourage you to tell us about the support you may need (please tick)

- | | | |
|---|---|---|
| <input type="checkbox"/> Visual impairment (do not tick if your eyesight is corrected by glasses) | <input type="checkbox"/> Exam access arrangements | <input type="checkbox"/> Temporary disability after illness (for example post-viral) or accident |
| <input type="checkbox"/> Hearing impairment | <input type="checkbox"/> Moderate learning difficulties | <input type="checkbox"/> Speech, language and Communication |
| <input type="checkbox"/> Disability affecting mobility | <input type="checkbox"/> Severe learning difficulties | <input type="checkbox"/> Other specific learning difficulty (eg Dyspraxia) |
| <input type="checkbox"/> Profound complex disabilities | <input type="checkbox"/> Dyslexia | <input type="checkbox"/> Education, Health and Care Plan |
| <input type="checkbox"/> Social and emotional difficulties | <input type="checkbox"/> Dyscalculia | <input type="checkbox"/> Other medical conditions (eg: epilepsy, asthma, diabetes) |
| <input type="checkbox"/> Mental health difficulties | <input type="checkbox"/> Other physical disability | <input type="checkbox"/> To provide further confidential information do so by letter using ref:GH |
| <input type="checkbox"/> Autism, spectrum disorders | <input type="checkbox"/> Other learning difficulty | |
| <input type="checkbox"/> Asperger's syndrome | <input type="checkbox"/> English is not my first language | |

9. Personal Data Fair Processing Notice:

I confirm that the personal information I have provided on this form is correct and that I give my permission for its collection and use by the College in the ways set out below:

Your signature

Date

I give permission for the college to

- Get in touch with me about my application, enrolment, progress or future opportunities using any of the contact details I have provided
- Inform me of college events and circumstances which are relevant to me
- Share my personal data with local authorities and other agencies who may contact me about services relevant to my application and attendance at college

I give my permission for my information to be used in my personal best interests by college personnel and other professionals directly involved in processing my application.

I understand that the college is obliged to share my personal data with government departments and agencies subject to their own fair processing notices.

If my course is funded or sponsored by an employer, I give permission for the college to share and discuss my application with my employer.

I give permission for the college to share with partner organisations my personal information sufficient only for the purposes of processing electronic payments and providing other services on behalf of the College.

If I am aged 18 years or younger on the day I sign this form, I accept that the college may discuss my application, and share my personal information with my school, parent(s) or carer designated as my next of kin.

I understand that if I am 18 years or younger but do not want the College to share my information with my school, parent or carer, I can discuss this with the Head of Student Services.