

19-25 EDUCATION APPLICATION FORM

Full-time study programme

Version 1.0



Wilson Stuart
University College Birmingham
Partnership Trust
Believing is Achieving

THRIVE @ The Hive

Surname / Family Name

First Name(s)

Title Mr Miss Mrs Ms

Date of Birth

Day		Month		Year			

Address

Post Code

Telephone Number (day)

Telephone Number (evening)

National Insurance Number

Email address

In which country are you normally resident? (please tick box)

UK

Other

if other please specify

Ethnic Origin

Have you been resident in the UK for the last three years for other than educational purposes?

Yes

No

If no, date of entry to UK

Day		Month		Year			

from which country

DISABILITIES

Please give details of your special educational needs and / or disabilities.

Do you have an EHCP? Yes No

LEARNING REQUIREMENTS

Please give details about the support you require to meet your needs.

EDUCATION TO DATE

Name and address of the most recent school / college / university	From	To	Part-time or Full-time
	Month Year	Month Year	

Qualifications gained to date

Exam Date	Subject	Level: O, GCSE, A, A/S, NVQ, GNVQ, ND
Month Year		

Examinations to be taken, or with results pending

Exam Date Month Year	Subject	Level: O, GCSE, A, A/S, NVQ, GNVQ, ND

WORK EXPERIENCE

Please give brief details of any work experience you have done. Please include training schemes, part-time and full-time employment and voluntary work.

We would like to know more about you and have left this space for you to write briefly about your spare time interests, career plans and what you hope to achieve in the future. Please add an additional sheet if required.

How did you find out about The Hive College?A Friends/RelationsB WebsiteC SchoolD Careers/ConnexionsE Radio advert – Which station?F Careers ConventionG Newspaper advert – Which newspaper?

CRIMINAL CONVICTIONS

Do you have any criminal convictions?

Yes

No

if Yes, please outline details here, including dates of convictions.

DECLARATION

I confirm that the information given on this form is true, complete and accurate and no information that has been requested has been omitted. I give consent to my data being processed for administrative purposes as required, in accordance with the Data Protection Act 1998. For some career pathways within the 19-25 Education Programme a Disclosure and Barring Service (DBS replaces the Criminals Record Bureau) check will have to be undertaken. I give consent to this check to take place when necessary.

Signature of Applicant

Date

Please return this application to:

**The Hive College Admissions
Wilson Stuart UCB Partnership Trust
Perry Common Road
Erdington
Birmingham
B23 7AT**

FOR INTERNAL USE *Applicants should ignore this section*

Date application received:

Date application acknowledged:

Date of interview:

Applicant attended open day