

North West Regional College Full-Time Application/Enrolment Form

Personal Details (Please complete ALL details clearly)

Surname: Forename:

Home Address:

Post Code:

If your term-time address will be different, please attach details.

Marital Status:

Single Married/Cohabiting
Widowed Separated/Divorced

Title: Mr Mrs Miss Gender: Male Female

Date of Birth: DD / MM / YY YY *(must be completed)*

Home phone:

Mobile Phone:

Email:

Next of Kin: Contact No:

OFFICE USE ONLY:

Course Code:

Student Ref:

Acknowledged:

Course Choices

Please state your 1st & 2nd course choices, and the campus of your chosen course (Derry/Londonderry, Limavady, Strabane)

1st Course Choice:
Campus:

2nd Course Choice:
Campus:

Education Details

Previous/Current School: Town:

Please list: Qualification already held (regardless of result) - please attach evidence of your results

Subject	Date	Exam Body	Level	Grade	Subject	Date	Exam Body	Level	Grade

Please list: Examinations to be taken - you will be required to provide evidence of your results

Subject	Date	Exam Body	Level	Grade	Subject	Date	Exam Body	Level	Grade

Learning Support

Please indicate if you have any learning difficulties/disabilities Yes No
Do you require us to give you additional help? Yes No

If you have indicated any disability or medical condition which may affect your studies, your details will be passed to the College Learning Support Co-ordinator who will contact you to discuss your learning needs in confidence.

Please state nature of disability & support required:

Equal Opportunities

(Please note: this will be separated by our Admissions staff from your application form once we have recorded the information)

In accordance with the regulations set up by the Department of Employment & Learning, regarding equal opportunities monitoring, please complete the following sections. **Tick as appropriate:**

Disability

(as defined by the Disability Discrimination Act 1995)

A physical or mental impairment which has a substantial or long term adverse effect on an individual's ability to carry out normal day to day activities:

Do you consider yourself to have such a disability:

Yes No

Community Background

Member of Protestant Community

Member of Roman Catholic Community

Neither

Other:

OFFICE USE ONLY: EQUAL OPPORTUNITIES UNIT

REF:

Ethnic Origin

Please indicate:

Black African Chinese

Black Caribbean Indian

Bangladeshi White

Irish Traveller Mixed Ethnic Group

Pakistani Other:

Continued...

Input by:
Date:

Additional Information

Do you have any: • Child Dependants (aged 16 or under 18 if in F/T education): Yes No
• Adult Dependants (i.e elderly relatives, unemployed spouse, etc.): Yes No

Employment Status (Please tick where appropriate)

Employed Full Time (5) Employed Part Time (6) Unemployed (9) Economically Inactive (14)

Sector: Agriculture, Hunting & Forestry (20) Health & Social Work (33) Mining & Quarrying (22) Education (32)
Community, Social & Personal (34) Public Admin. & Defence (31) Elect. / Gas & Water (24) Fishing (21)
Transport, Storage & Communication (28) Hotel & Restaurants (27) Construction (25) Manufacturing (23)
Real Estate, Renting & Business (30) Financial Intermediation (29) Wholesale & Retail (26) Not Known (99)

Qualifications Please tick for the highest level of qualification you have attained and any GCSE/Leaving Certificate results attained.

Degree Level & above										
GCE A/AS Level (Grade A-E)										
GCE or equivalent (Include O Level & CSE)	State Actual Grade			Number of GCSEs at each grade (exclude English, Maths & Science)						
	Maths	English	Science	A*/A	B	C	D	E	F	G
Ordinary Leaving Certificate	State Actual Grade			Number of Leaving Cert at each grade (exclude English, Maths & Science)						
	Maths	English	Science	A1-A2	B1-B3	C1-C3	D1			
Honours Leaving Certificate	State Actual Grade			Number of Leaving Cert at each grade (exclude English, Maths & Science)						
	Maths	English	Science	A1-A2	B1-B3	C1-C3	D1-D3			
EDEXCEL (BTEC)	First		National		Higher		GNVQ			
Other Qualifications <small>(Please tick where appropriate)</small>	City & Guilds		OCR/RSA		LCCI		CPVE			
	Professional Bodies		Other Qualifications		No Formal Qualifications					

Finance Information

Are you in receipt of Education Maintenance Allowance? Yes No

OFFICE USE ONLY:
Form Issued:

Please enter EMA No. **Please enter your Student Loan Number (for HND Applicants only)**

Protection of Children and Vulnerable Adults Legislation

Have you ever been investigated for allegations relating to adult or child abuse? Yes

If **YES** you are required to send information giving details of dates, details and outcomes of all incidents to the 'Designated Child Protection Officer' at the College. **Please mark the envelope 'Confidential'.**

Have you ever been convicted of: • a criminal offence of a violent or sexual nature? Yes
• an offence relating to the distribution and/or sale of illegal drugs? Yes

Student Declaration

I certify that the details on this form are correct and that if accepted I wish to be enrolled for the above course and accept that payment of any fees incurred is my responsibility. I understand that I will cease to be a student of the College if I have an absence without explanation for more than three consecutive weeks. In such circumstances, I also understand I will have to apply to be re-admitted as a student. By signing this form I agree to comply with all College regulations, policies and guidelines. Copies of these can be obtained from College Libraries.

Signed **Print Name** **Date**

Data Protection Notice: Some of the information used on this form will be forwarded to the Department of Employment & Learning (and its appointed agents) for statistical purposes. Individual students will not be identified in any analysis.

Please return to the admissions office suitable for the location of your chosen course:

Location: Limavady
Admissions Office
North West Regional College
Main Street
Limavady
BT49 0EX

Location: Derry/Londonderry or Strabane
Admissions Office
North West Regional College
Strand Road
Londonderry
BT48 7AL

www.nwrc.ac.uk

Please attach any additional information you feel will support your application when returning your form.