



INTERNATIONAL STUDENT APPLICATION FORM

Please complete all sections using **BLOCK** capitals

YOUR DETAILS

| | |
|--|---|
| Forename: | Date of Birth: / / <small>(e.g. DD / MM / YYYY)</small> |
| Surname: | Telephone No: |
| Gender: Male Female Other | Mobile No: |
| Home Address: | Email: |
| | School Last Attended: |
| | City: |
| Post / Zip Code: | Nationality: |
| First Language <small>(if not English)</small> : | Country of Permanent Residence: |
| Emergency Contact Person: | Country of Birth: |
| Relationship to Named Person: | Passport Number: |
| Does This Person Speak English? Yes No | Passport Expiry Date: |
| Emergency Telephone 1(+ISD code): | Emergency Telephone 2 (+ISD code): |

COURSE SELECTION

| |
|---|
| Course Title: |
| Intended Start Date: / / Course Duration (Years): |

EDUCATION DETAILS

Qualification already held - *You will be required to provide evidence of your results*

| Subject | Date | Exam Body | Level | Grade |
|---------|------|-----------|-------|-------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Examinations to be taken - *You will be required to provide evidence of your results*

| Subject | Date | Exam Body | Level | Grade |
|---------|------|-----------|-------|-------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| | | | |
|--|--------|--|-----------|
| Have you previously studied in the UK? | Yes No | If YES, please confirm dates of study: | From: / / |
| | | | To: / / |

KNOWLEDGE OF ENGLISH

What is your first language?

Have you taken an approved Secured English Language Test (SELT) to indicate your level of English? Yes No

Please visit www.gov.uk/student-visa/knowledge-of-english if you think you may be exempt from showing proof of English Language knowledge

Specify Secure English Language Test completed (SELT) (e.g. IELTS, Pearson):

Listening: Reading: Writing: Speaking: Overall Grade: Date of Test: / /

Other English Language test (please specify):

PAYMENT OF FEES (Please provide the details of name and address of the person responsible for Fees)

| | |
|-------|----------|
| Name: | Address: |
|-------|----------|

| | |
|----------------|---------------|
| Email Address: | Telephone No: |
|----------------|---------------|

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 YES, please state nature of disability and support required:

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.

SAFEGUARDING

Have you ever been convicted of / received a caution for:

- | | | |
|---|-----|----|
| • a criminal offence of a violent or sexual nature? | Yes | No |
| • an offence relating to the distribution and/or sale of illegal drugs? | Yes | No |

Failing to complete this section or providing misleading or false information may lead to your application/enrolment being withdrawn.

Ticking 'Yes' to any of the questions above will result in a follow up meeting in order to obtain further details.

PERSONAL STATEMENT

Please write a few sentences telling us: (Attach an additional sheet if required)

1) Why you want to study at NWRC and how this can help your future career plan?

2) What is your future academic plan, and what subject would you like to develop further after attending this course?

3) If you have any relevant work experience you think is applicable for this application, please provide details:

Have you ever been refused for a Tier 4 Study Visa or Student Visa?

Yes

No

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. I understand that I will be withdrawn from the College if it becomes clear that I have provided false statements or have withheld information. In such circumstances, I also understand that I will have to re-apply to be re-admitted as a student. By signing this form I agree to comply with all College Policies, Procedures and Terms & Conditions. Terms & Conditions can be found on our College website: www.nwrc.ac.uk/policies. (Other formats are available on request). **You will be required to provide identification prior to enrolment.**

Signed Print Name Date

Enrolment Form Privacy Notice: North West Regional College (as Data Controller) is permitted to process personal data where there is a lawful basis to do so. NWRC recognises and respects the importance of your privacy and is committed to treating your information responsibly and in compliance with Data Protection Act 2018 legislation. The lawful basis for processing information provided on this form is for the purpose of student applications under UK GDPR Article 6(1) as 'a legal obligation' and/or 'processing is necessary for the performance of a task carried out in the public interest'. The information provided on this form will be processed as part of your enrolment and registration as an international student. We will also use your information to administer studies, deliver programmes, monitor performance and attendance and manage examination and graduation. Your information will be used to provide you with College facilities and services, support and process any payments to be made to you. We may use your information to conduct research and surveys to identify ways to enhance learning, teaching, assessment and the whole student experience. Information will be passed between relevant Curriculum Schools and support Departments within the College for operational purposes and will be disclosed to external agencies where we have an obligation to do so and where a lawful basis exists, such as; Government Departments (Department for the Economy) and their Nominees, Statutory Bodies, Higher Education Statistics Agency, Student Loans Company, Funders, Learning Records Service for allocation of your Unique Learning Number, Placement Providers, UCAS, Universities, Credit Reference Agencies, Crime Prevention Organisations. Employers (who pay your fees and allow you time off work to attend courses) may request information regarding your attendance, progress and results. All personal data will be held in line with the Sector Retention & Disposal Schedule. For further information on your individual rights and to access our Data Protection Policy, please visit www.nwrc.ac.uk/policies

MARKETING INFORMATION

We would be grateful if you could indicate which method of College promotions (i.e. advertising, social media, College Open Day, careers talk at school, word of mouth, etc) has encouraged you to make this application.

Marketing - The College would like to stay in touch with you if there are new courses, events/initiatives or materials we think you may be interested in. You will be given the opportunity to unsubscribe with each email communication which will remove you from future mailings. You can also withdraw your consent to this at any time by logging back onto the Application Portal and updating your preferences or by contacting our Data Protection Officer at dpo@nwrc.ac.uk.

Yes

No

Contact - Your success at North West Regional College is best achieved through support from staff, College Support Services and family / friends. In order to provide you with the best student support our College has to offer we may wish to contact your emergency contact to keep them updated on your progress. Please select "Yes I agree" if you consent to us contacting your emergency contact about your progress. You have the right to withdraw your consent to this at any time by logging into the Application Portal and updating your preferences or by contacting the Data Protection Officer at dpo@nwrc.ac.uk.

Yes

No

Providing misleading information may lead to your application/enrolment being withdrawn

CHECK LIST

Please enclose the following documents with your application form. Your application will not be processed until all items are received by the College:

- Photocopy or scan of official Qualification Certificates -signed by school/college representative
- Photocopy or scan of International English Examination Test
- Photocopy of your Passport

You will be asked to provide additional evidence in relation to your financial statements as per regulations. The International Officer will request this information from you on receipt of this application.

Please return your completed form to the Admissions Office:

by post: Admissions Office, NWRC, 78 - 80 Strand Road,
Derry-Londonderry, Northern Ireland, UK, BT48 7AL

by email: admissions@nwrc.ac.uk

OFFICE USE ONLY

CAS Number details:

Course code:

Student Ref:

Acknowledged:

Using a separate sheet please attach any additional information that you feel will support your application when returning your form