

For office use only  
Reference No:

The course or activity that you are undertaking is being partly financed by the European Social Fund (ESF), through a programme called co-financing.



## DEGREE LEVEL COURSE (HNC/HND) APPLICATION 2018/2019

Please complete this application form for all HNC/HND courses at all centres. For help completing this form please contact the applications team (contact details on back page). PLEASE COMPLETE IN BLACK INK AND BLOCK CAPITALS.

### PERSONAL DETAILS

Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="checkbox"/> .....		Address:	
Surname:		Postcode:	
Forename:		National insurance number:	
Date of birth:		Mobile:	
Telephone (home):		E-mail:	

PLEASE ENSURE YOU PROVIDE ACCURATE PHONE/MOBILE AND EMAIL DETAILS FOR CORRESPONDENCE SUCH AS TEXT ALERTS.

### CENTRE / COURSE APPLYING FOR (ALL APPLICANTS TO COMPLETE)

Applications for all centres are processed at our main Huddersfield centre. When your application form is complete you need to return it to the address on the back page of this form. Please tick which centre you wish to study at:

**Dewsbury Learning Quarter**

For courses at: Pioneer Centre and Springfield Sixth Form Centre

**Huddersfield Centre**

For courses at: Huddersfield Centre, Brunel Construction Centre, Engineering Centre, Hargate Hill Equestrian Centre, Process Manufacturing Centre and Taylor Hill Centre

Course title	Level of study

### INTERVIEWS

The applications team will try to accommodate the needs of all applicants when booking interviews. Please state below any dates when you will be unavailable for interview:

If you feel you need any support when you come for your interview, please tell us what would help you.

Date received	FOR OFFICE USE ONLY			Notes
	Shortlisted by (initials)	ALS <input type="checkbox"/>	FSM <input type="checkbox"/>	
	CC <input type="checkbox"/>	YP <input type="checkbox"/>	Input / ACK / Initials	
	LAC <input type="checkbox"/>	YC <input type="checkbox"/>	Ref: Req <input type="checkbox"/> Recvd. <input type="checkbox"/>	
			File log No:	

**ETHNICITY (ALL APPLICANTS TO COMPLETE)**

This information will be treated with the strictest of confidence and is used to ensure that our provision is meeting the needs of the community. Please tick the box that most applies to you.

- |   |  |  |  |
|---|--|--|--|
| <b>White</b>  | <b>Mixed/multiple ethnic group</b>                                       | <b>Asian/Asian British</b>                             | <b>Black/African/Caribbean/Black British</b>                                 |
| <input type="checkbox"/> 31 English / Welsh / Scottish / Northern Irish / British | <input type="checkbox"/> 35 White and black Caribbean                    | <input type="checkbox"/> 39 Indian                     | <input type="checkbox"/> 44 African  |
| <input type="checkbox"/> 32 Irish   | <input type="checkbox"/> 36 White and black African                      | <input type="checkbox"/> 40 Pakistani                  | <input type="checkbox"/> 45 Caribbean  |
| <input type="checkbox"/> 33 Gypsy or Irish traveller                              | <input type="checkbox"/> 37 White and Asian                              | <input type="checkbox"/> 41 Bangladeshi                | <input type="checkbox"/> 46 Any other black / African / Caribbean background |
| <input type="checkbox"/> 34 Any other white background                            | <input type="checkbox"/> 38 Any other mixed / multiple ethnic background | <input type="checkbox"/> 42 Chinese                    | <b>Other ethnic background</b>   |
|   |  | <input type="checkbox"/> 43 Any other Asian background | <input type="checkbox"/> 47 Arab   |
|   |  |  | <input type="checkbox"/> 98 Any other ethnic group                           |

**STUDENT SUPPORT (ALL APPLICANTS TO COMPLETE)**

We want to make sure that you succeed right from the start. Please let us know if you consider yourself to have a disability, learning difficulty or any special educational needs (SEN). Please be aware you will need to apply for support via the Disabled Students Allowance (DSA).

**I do not have** a learning difficulty and/or disability

**I have** a learning difficulty and/or disability (please tick everything that you think applies to you below)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> 04 Visual impairment                 | <input type="checkbox"/> 12 Dyslexia                                       | <input type="checkbox"/> 93 Other physical disability                                 |
| <input type="checkbox"/> 05 Hearing impairment                | <input type="checkbox"/> 13 Dyscalculia                                    | <input type="checkbox"/> 94 Other specific learning difficulty (e.g. Dyspraxia)       |
| <input type="checkbox"/> 06 Disability affecting mobility     | <input type="checkbox"/> 14 Autism spectrum disorder                       | <input type="checkbox"/> 95 Other medical condition (e.g. epilepsy, asthma, diabetes) |
| <input type="checkbox"/> 07 Profound/complex disabilities     | <input type="checkbox"/> 15 Asperger's syndrome                            | <input type="checkbox"/> 96 Other learning difficulty                                 |
| <input type="checkbox"/> 08 Social and emotional difficulties | <input type="checkbox"/> 16 Temporary disability after illness or accident | <input type="checkbox"/> 97 Other disability  |
| <input type="checkbox"/> 09 Mental health difficulty          | <input type="checkbox"/> 17 Speech, language and communication needs       | <input type="checkbox"/> 98 Prefer not to say   |
| <input type="checkbox"/> 10 Moderate learning difficulty      |  |   |
| <input type="checkbox"/> 11 Severe learning difficulty        |  |   |

Any additional information:

**CRIMINAL CONVICTIONS (ALL APPLICANTS TO COMPLETE)**

Kirklees College welcomes applications from ex-offenders and considers them on their merits. However, you are required to tell us about any convictions which are not spent under the Rehabilitation of Offenders Act (1974).

Do you have an unspent criminal conviction(s) or prosecutions pending  Yes  No

**Please note: you do not need to tick the yes box if your criminal conviction is spent as defined by the Rehabilitation of Offenders Act 1974.**

**MORE ABOUT YOU (ALL APPLICANTS TO COMPLETE)**

Are you currently, or have you spent any time in local authority care in the last 2 years  Yes  No

Are you a young parent (under 20)?  Yes  No

Are you under 26 and currently have caring responsibility for a family member or friend?  Yes  No

## YOUR PERSONAL STATEMENT (EXTERNAL APPLICANTS ONLY TO COMPLETE)

The information you provide in this section will be used in your interview as part of discussions so please answer each question as fully as possible.

Why have you chosen to study this course? Do you have a specific career aim in mind for the future?

### **Disclaimer**

Kirklees College reserves the right to amend, withdraw, cancel, alter or amalgamate any or part of the course, location, facilities or costs at any time. Please be aware the location of some of the courses offered could be subject to change between the time of application and actual start date. All courses run subject to enrolment of minimum numbers of students.

**QUALIFICATIONS (ALL APPLICANTS TO COMPLETE)**

Please make sure you have double checked that you meet the minimum entry criteria for the course(s) you are applying for. All applications are shortlisted based on the information you provide in this section. If you are currently awaiting the results of a qualification please provide the predicted grade. If you have already achieved a result then please provide the grade and year achieved. (Use additional sheet if necessary)

Level/award (eg. GCSE/BTEC)	Subject	Predicted grade	Achieved grade	Year achieved

**EDUCATION / TRAINING / EMPLOYMENT DETAILS (ALL APPLICANTS TO COMPLETE)**

Are you currently:  in education  in training  in employment  unemployed

If in education/training or employment please provide details below:

**ALL APPLICANTS MUST PROVIDE A REFEREE.** If you are currently in education, training or employment then we will contact them for a reference. You must provide the full name and address in the referee box below. Failure to supply this may delay your application/interview. All other applicants should provide the name and address of a contact who will be able to supply you with a reference, please note this cannot be a relative or someone you live with.

**WHERE POSSIBLE, PLEASE ATTACH YOUR COMPLETED REFERENCE WITH YOUR APPLICATION FORM.**

**REFEREE (Full name and address needed)**  
**IF YOU DO NOT PROVIDE THIS WE CANNOT PROCESS YOUR APPLICATION.**

Name:

Address:

Postcode:

Email:

Alternatively, if you are at Kirklees College please provide the name of your **course** and **tutor** below.

**PLEASE ASK YOUR CURRENT TUTOR TO ATTACH YOUR COMPLETED REFERENCE WITH YOUR APPLICATION FORM.**

Current course:

Tutor name:

**SIGNATURE (ALL APPLICANTS TO COMPLETE)**

I agree to Kirklees College processing and using the data contained in this form. I agree that the information provided on this form is accurate and true. I agree to Kirklees College sharing my details with relevant organisations to support my application. I agree to Kirklees College contacting my named referee above for verification/information of my education/employment record or to provide a personal reference.

Signature of applicant	Date
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**PLEASE RETURN THIS FORM TO:**

Applications team, Kirklees College, Waterfront Quarter, Manchester Road, Huddersfield HD1 3LD.  
Tel: 01484 437033 Email: applications@kirkleescollege.ac.uk