

## Higher Nationals Course Application Form



(PLEASE WRITE IN WHITE SPACES)

<b>Personal Details</b>				
Title (e.g. Ms, Mr)		Surname/Family Name		
First Name		Middle Names		
Street Address				
Address Line 2				
County / City		Postcode		
Telephone		Mobile Number		
Email Address				
Date of Birth		Country of Birth		
Gender	☐ Male ☐ Fem	nale Prefer Not T	o Say	
Passport Number (if known)		Nationality		
Course of Study				
Course of Study Please select or ti		ich pathway you are inte	rested in studying:	
	siness (General)	, , ,	, ,	
HND in Bus	HND in Business (General)			
HND in Bus	HND in Business (Accounting and Finance)			
HND in Bus	HND in Business (Business Management)			
HND in Bus	HND in Business (Entrepreneurship and Small Business Management)			
HND in Bus	HND in Business (Human Resource Management)			
HND in Bu	siness (Marketing)			
HND in Bu	siness (Operations Man	nagement)		

Have you ever been convicted of a criminal offence (not including motoring offences)					
or have any ongoing?					
Are you under 18?  Yes No (	(If 'Yes' please complete the following)				
Name of parent/guardian					
Contact number of parent/guardian					
Mode of Study					
Full time Part time	Distance Learning				
Which next available entry period are you applying for?					
☐ January ☐ April	September				
How do you intend to pay your course fees	?				
Self-funded Government G	rant Sponsorship Other				
Ethnicity					
Please indicate your ethnicity by selecting or ticking the appropriate box. Your answer is for monitoring purposes and in no way influences the outcome of your application.					
☐ White	Other Asian Background				
Black or Black British-Caribbean	Mixed White and Black Caribbean				
Black or Black British-African	Mixed White and Black African				
Other Black Background	Mixed White and Asian				
Asian or Asian British-Indian	Other Mixed Background				
Asian or Asian British-Pakistani	Other Ethnic Background				
Asian or Asian British-Bangladeshi	☐ Not known				
Chinese	Prefer not to say				
Previous Education					
Have you previously studied at Christ The Redeemer College?  Yes  No If 'Yes' please complete the following:					
If 'Yes', on what course?					
Student No. if known					

### **Academic Qualifications**

Start with your most recent qualifications. If you have not received your award, indicate when you expect to do so. YOU MUST HAVE AN ENGLISH LANGUAGE QUALIFICATION TO BE ACCEPTED ONTO THIS COURSE E.G. GCSE GRADES A-C, IELTS GRADE 5.5 OR CAMBRIDGE ENGLISH GRADE B2

All quali	fications listed sho	uld be sup	ppor	ted by origin	al c	ertificat	es.		
Level e.g. BA, HND	Subject/Course	Grade	Ins	titution/Awa	ırdin	g Body	_	om nth/ ear	To Month/ Year
Higher	Education								
Second	lary/Further Educa	ation							
		I .							
English	Language Ability	,							
Qualificate.g. IEL	ation TS, GCSE,	Score/G	rade						Award Date
Qualificate.g. IEL	ation			Listening	Wr	iting	Readi	ng	
Qualificate.g. IEL	ation TS, GCSE,	Score/G			Wr	iting	Readi	ng	
Qualifica e.g. IELT Cambrid	ation TS, GCSE,	Score/G Speakin	g		Wr	iting	Readi	ng	
Qualifica e.g. IELT Cambrid	ation FS, GCSE, dge English  xperience - Paid o	Score/G Speakin	g	Listening	Wr	iting Start Month		Enc	Date
Qualifica e.g. IELT Cambrid Work E	ation FS, GCSE, dge English  xperience - Paid o	Score/G Speakin	g ary	Listening	Wr	Start		Enc	Date
Qualifica e.g. IELT Cambrid Work E	ation FS, GCSE, dge English  xperience - Paid o	Score/G Speakin	g ary	Listening	Wr	Start		Enc	Date
Qualifica e.g. IELT Cambrid Work E Organis Address	ation FS, GCSE, dge English  xperience - Paid o	Score/G Speakin  or Volunta	g ary	Listening	Wr	Start		Enc	Date

Organisation Name and Address	Job Title	Start Month/Year	End Month/Year
Addiess		World Fear	Worth Tear
Duties and Responsibilities			
Organisation Name and	Job Title	Start	End
Address		Month/Year	Month/Year
Duties and Responsibilities			
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Learning Support Needs			
Do you consider that you have	any of the following learn	ing support ne	eds?
☐ Dyslexia			
Autions On a strong Biologic	/		
	r/Asperger's syndrome		
Physical impairment or mo	obility problem		
Rlind or serious sight issu	es not corrected by wearin	in spectacles	
		9 00000000	
Deaf or serious hearing in	npairment		
A long-standing illness or	health issue		
Any other disability			
None			
Please Tell Us How You Got	To Know About The Cou	ırse You Are	Applying For
Tick all that apply:			
☐ Our Website	☐ Online Advert	☐ Social M	
☐ Other Website	☐ Newspaper Advert	☐ Prospec	
☐ Search Engine e.g. Google	☐ Educational Directory	•	specify below)
☐ Personal Referral (Write refer	er name and/or code here)	Specify 'Ot	ner nere

### Declaration

I declare to the best of my knowledge, that all the above information is true, complete and accurate. I undertake to observe the regulations of the college and to comply with the resolutions, rules and conditions which the college may make for its students from time to time. I give my consent to the processing of my data by the college.
Signed

Completed applications must be sent to: Admissions Officer, Christ The Redeemer College, The Rayners, 23 Village Way East, Harrow, Middlesex, HA2 7LX

# For Office Use Only 1. LEARNING SUPPORT NEEDS: Official interviewer to please comment on any learning support needs. NOT SHORTLISTED $\Box$ 2. INTERVIEW SHORTLISTED Any other remarks [including suitability for chosen course]: **INTERVIEWERS** Position 1. Position Yes **ADMITTED** AGREED FEE £ Rector Pro Rector

Date

Date