





## 6a Support with your Learning

Do you receive extra support at the moment?  YES  NO

Do you think you would benefit from extra support?  YES  NO

If yes, please tick the relevant box(es) below

Dyslexia/Specific Learning Difficulty	<input type="checkbox"/>	Hearing Impairment	<input type="checkbox"/>	Visual Impairment	<input type="checkbox"/>	Speech Impairment	<input type="checkbox"/>	Autistic Spectrum Condition	<input type="checkbox"/>
Physical Disability	<input type="checkbox"/>	Mobility Difficulty	<input type="checkbox"/>	Medical Condition	<input type="checkbox"/>	Mental Health Issues	<input type="checkbox"/>	Emotional/Behavioural Issues	<input type="checkbox"/>
Moderate Learning Difficulty	<input type="checkbox"/>	Severe Learning Difficulty	<input type="checkbox"/>	Other Disability	<input type="checkbox"/>				
Reading	<input type="checkbox"/>	Writing	<input type="checkbox"/>	Spelling	<input type="checkbox"/>	Maths	<input type="checkbox"/>	English for Speakers of Other Languages	<input type="checkbox"/>
Other	<input type="checkbox"/>	Please give details _____							

Do you speak a language other than English at home?  YES  NO

I am happy for information to be passed on to staff to arrange support?  YES  NO  N/A

OFFICE USE ONLY

Copy to LSO

Date

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## 6b Child Care Support

Do you think you would benefit from child care support?  YES  NO

## 7 Financial Support

Would you like further information about financial help available to you?  YES  NO

## 8 Fee Remissions

Please provide details below of any benefits you are receiving:

Income Support	<input type="checkbox"/>	Housing / Council Tax Benefit	<input type="checkbox"/>	Jobseekers Allowance	<input type="checkbox"/>	Working Tax Credit	<input type="checkbox"/>
Disability Benefits	<input type="checkbox"/>	Other	<input type="checkbox"/>	(Please give details) _____			

## 9 Equal Opportunities Monitoring

Please tick which group best describes your ethnic background. These groups are in line with the 2001 Census (for statistical purposes only)

<b>Asian or Asian British</b>			
<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Indian	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Other Asian background
<b>Black or Black British</b>			
<input type="checkbox"/> African	<input type="checkbox"/> Caribbean	<input type="checkbox"/> Other Black background	
<b>Mixed</b>			
<input type="checkbox"/> White & Asian	<input type="checkbox"/> White & Black African	<input type="checkbox"/> White & Black Caribbean	<input type="checkbox"/> Other mixed background
<b>Other</b>			
<input type="checkbox"/> Chinese	<input type="checkbox"/> White - British	<input type="checkbox"/> White - Irish	
<input type="checkbox"/> Other White background	<input type="checkbox"/> Please specify: _____	<input type="checkbox"/> Prefer not to say	

## 10a College Commitment to Disabled People

Please see attached guidance notes

## 10b Declarations

I have read and understood the college commitment to disabled people (please see attached guidance notes)

## 11 Signature

I confirm that the above information is correct.

Signature of Applicant

\_\_\_\_\_

Date 

D	D	M	M	Y	Y
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Data Protection Act 1998 –The information you provide will be passed to the Learning and Skills Council (the LSC). The LSC is responsible for funding, planning and encouraging education and training for young people and adults in England, and is registered under the Data Protection Act 1998. The information you provide will be shared with other organisations for the purpose of administration, careers and other guidance, and statistical and research purposes. Other organisations with which we will share information include, the Department for Children, Schools and Families, Business and Enterprise Department, Local Authorities, Higher Education Statistics Agency, Higher Education Funding Council for England, educational institutions and organisations performing research and statistical work on behalf of the LSC or its partners. The LSC also administers the learner registration service (LRS) which will use your information to create and maintain a unique learner number (ULN). The LSC is also a co-financing organisation and uses European Social Funds from the European Union to directly or indirectly part-finance learning activities, helping develop employment by promoting employability, business spirit and equal opportunities, and investing in human resources. Further information about partner organisations and the ULN and what they do, may be found at [www.lsc.gov.uk/providers/Data/help/dataprotection](http://www.lsc.gov.uk/providers/Data/help/dataprotection).

At no time will your personal information be passed to organisations for marketing or sales purposes. From time to time students are approached to take part in surveys by mail and phone, which are aimed at enabling the LSC and its partners to monitor performance, improve quality and plan future provision.

Please return the completed form to: Central Admissions Unit, York College, Sim Balk Lane, York YO23 2BB

## 13 Personal Statement (this section must be completed)

Please provide a brief statement about how the course(s) for which you are applying will help you achieve your aims. The following headings may help you complete this section

I am interested in the course(s) applied for because ...

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What do you think you might do after you have finished your course?

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Please add any information you wish under the following headings

1. Achievements (eg Duke of Edinburgh, sporting achievements, etc.)

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2. Employment Record

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3. What you do in your free time

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### COLLEGE STAFF USE ONLY

**1** Interview Date       Time

Date letter sent       UTA

DNA

**2** Interview Date       Time

Date letter sent       UTA

DNA

**3** Interview Date       Time

Date letter sent       UTA

DNA

**4** Interview Date       Time

Date letter sent       UTA

DNA

DNA letter sent

Date withdrawn

Date Rec'd in CAU:

Ref 1 enclosed

Ref 1 request sent

Ref 1 returned

Ref 2 request sent

Ref 2 returned

Course Title	Code	Firm offer Yes or No	Conditional offer Yes or No	Date offer letter sent <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
				<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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				<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Careers Letter Sent

Kit List

Enrolment information sent

Interviewer's signature (1st Interview)

Interviewer's signature (2nd Interview)

Student Ref OFFICE USE	
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Name of Applicant		Date of Birth	<table border="1" style="display: inline-table; text-align: center;"> <tr> <td style="width: 20px;">D</td> <td style="width: 20px;">D</td> <td style="width: 20px;">M</td> <td style="width: 20px;">M</td> <td style="width: 20px;">Y</td> <td style="width: 20px;">Y</td> </tr> </table>	D	D	M	M	Y	Y
D	D	M	M	Y	Y				

Course(s) applied for		

## 12 Reference

**To the referee**

The college would be pleased if you could complete this section outlining your view on the suitability of the applicant for the course(s) chosen. When complete, please return to **Central Admissions Unit, York College, Sim Balk Lane, York YO23 2BB.**

**Assessment of potential (please tick)**

	<b>General Behaviour:</b>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
<b>Motivation:</b>		Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
<b>Attitude at Work:</b>		Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
	<b>Punctuality:</b>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>
	<b>Absence Record:</b>	Good <input type="checkbox"/>	Average <input type="checkbox"/>	Poor <input type="checkbox"/>

**Please add any additional information you feel necessary / important / appropriate in support of the application.**

Suitability for the course applied for .....

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General quality of work .....

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Any additional information .....

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**Referee name** ..... **Position** .....

**Referee signature** ..... **Date**

D	D	M	M	Y	Y
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 .....

**Address** ..... **Telephone** .....

..... **Email** .....

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Dear Sir / Madam

Please find on the reverse side of this letter a pro-forma to be completed to support the named applicant who has applied to attend a programme of study at York College.

We would be grateful if you could complete the sections outlining your view of the suitability of the applicant for the courses chosen.

When completed, please return to:

**Central Admissions Unit**  
**York College**  
**Sim Balk Lane**  
**York YO23 2BB**

Many thanks for taking the time to complete this request on behalf of the applicant.

Yours faithfully



Dr Alison Birkinshaw  
Principal and Chief Executive



# Guidance notes for application form

**It is important that you read these notes carefully in order to complete your application form correctly and clearly. Each section provides a step by step guide explaining exactly what information is required and how it should be written down. Please complete all sections of this form.**

Before filling in the form it is important that you have consulted the relevant course information in the York College Part-time Prospectus or the web pages ([www.yorkcollege.ac.uk](http://www.yorkcollege.ac.uk)). This will help you to make an informed decision about your course choice.

The application form is the first step to receiving an initial advice and guidance interview. Whilst it is important to select carefully the course you wish to apply for, there are many opportunities to change your choice of course, in the light of further guidance, throughout the application procedure.

## **Section 1: Personal Details**

Please fill in your personal details clearly in block capitals.

When filling in your date of birth please give the day, month and the year as detailed in the following example: 4th July 1992 should be written 04 07 92.

## **Section 2: Courses Applied For**

### **Section 2a**

This should be completed by students who are applying for part-time programmes of study. If you wish to be considered for Work-based Learning or full-time courses you will need to fill in a different application form. If you are undecided between a few courses, please list them in priority order, being careful to write down the course titles exactly as they are written in the prospectus. Check the qualifications needed or talk to a careers adviser if you are unsure.

### **Section 2b**

Please indicate the month and year in which you hope to commence your course. See example in brackets.

### **Section 2c**

Please indicate if you have already attended a course at York College, and specify which course and when.

## **Section 3: Educational Details**

Please write down details of your last school or college attended. (For under 19's only).

## **Section 4: Qualifications and Employment**

### **Qualifications**

Please write down the level, subject and year of any qualification already taken, or about to be taken (see examples in brackets).

### **Current employer's name and address**

If you are currently employed please write down your employer's name and address, stating the position held, and whether you are in full-time or part-time employment. If you are under 19 you do not normally have to pay course fees. If you know you are being sponsored, please state this and specify the organisation.

### **Section 5a: Reference**

This section asks for the name and address of one referee.

**Reference** This should be someone who is able to comment on your academic ability. You could use a previous or current employer. There is a reference form provided in section 12, which can be detached and sent to a referee. The referee will then complete the information required and post back to York College Central Admissions Unit.

**Please note for Child Care and Health & Social Care courses a Criminal Records Bureau (CRB) check will be necessary. This will take place before your course starts or during your course if you start a work placement. There will be a charge for this.**

### **Section 5b: Criminal Conditions/Young Offenders Register**

The college requires you to say on your application form whether you have any criminal convictions or appear on the Young Offenders Register. You should tick the appropriate box if you have a conviction, not including:

- A motoring offence that you received a fine or three penalty points for; or
- A spent sentence (as defined by the Rehabilitation of Offenders Act 1974), except if you wish to apply for child care, teaching or health and social care courses.

An unspent criminal conviction does not necessarily preclude you from entry to a course.

The college may then ask you for more details.

**Section 6a: Support with your Learning**

This information is collected so that we are aware of any additional support you may need. Please tick the appropriate boxes if you feel you would benefit from support. This information will be passed to our Learning Support Office to arrange support.

**Section 6b: Child Care Support**

Please tick the YES box if you would benefit from information and support regarding child care.

**Section 7: Financial Support**

Please indicate whether you would like further information on financial support.

**Section 8: Fee Remissions**

You may not have to pay fees based on the benefits you receive and your household income. Please note that this is for **guidance only** and covers further education courses. It **does not** apply to work-based learning, higher education and some part-time courses which are classed as full cost courses. Fee remissions are not guaranteed.

**Section 9: Equality Policy**

Tick which box you think best describes yourself. The information is not used as part of any decision connected with your application, but helps us to monitor our equal opportunities policy.

**Section 10a: College Commitment to Disabled People**

It is important that you are aware of the college's commitment to ensuring that disabled people, and those with learning difficulties and/or disabilities are treated fairly. Please read the following statement carefully, and then sign to confirm that you have read and fully understand the college's commitment.

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'York College is committed to ensuring that disabled people, including those with learning difficulties, can access, participate and succeed in their learning. We will make all reasonable adjustments to ensure that disabled people are not substantially disadvantaged. Please make sure that we know what you need so that we can make reasonable adjustments to help you succeed.'

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**Section 10b: Declarations**

This section asks you to confirm that all the information you have filled in on the application form is correct. Please check through your application form carefully and then sign and date your confirmation.

**Section 11: Signature****Section 12: Reference**

Students should fill in their name and course(s) applied for in the boxes provided at the top of the page.

You may wish to detach this page in order to pass the reference pro-forma to a chosen referee.

**Section 13: Personal Statement (This section must be completed)**

Please fill in the different sections with as much detail as possible. This gives us an insight into what you hope to do in the future and helps to give us a more rounded picture.

Please return your completed form to:

**Central Admissions Unit**  
**Sim Balk Lane**  
**York**  
**YO23 2BB**

An acknowledgement text or card will be sent to you promptly advising you that interview information will be emailed or posted to you within 14 working days of receipt of your application form.

**York College reserves the right to refuse admission to a course where it has reasonable grounds for presuming that such an enrolment would not be in the best interests of the college.**

**York College has a Safeguarding Policy that conforms to the Local Safeguarding Children Board (LSCB) policy and guidance.**

**All documents can be made available in alternative formats.**

