

# Part-Time Application Form

If you need any help or advice on completing this form, please contact our Recruitment Office on free phone **0500 551434**.

This form is for further education part-time courses only. For part-time higher education courses please contact the Recruitment Office on free phone **0500 551434** for the correct application form.

If you would like to have this form on a computer disc, audio tape, or Braille, please call the Recruitment Office on free phone **0500 551434**.

We celebrate equality and diversity and offer equal opportunities to all.

## Personal details

Surname:

Forename(s):

Date of birth:

Title: Mr/Mrs/Ms/Miss/Other (please state):

Nationality:

## Unique Learner Number (if known)

No:

## Contact details

Address:

Postcode:

Home tel:

Mobile tel:

Email:

## Residency

Have you been permanently resident in the UK for the past 3 years? Yes  No

Country of residency:

If no, please state where you have been living and why:

If no, please give your Date of Entry to the UK:

## Please tick the box that describes your ethnic origin

English / Welsh / Scottish / Northern Irish / British

Any Other White background

Irish

Gypsy or Irish Traveller

Mixed / Multiple ethnic group

White and Black Caribbean

White and Black African

White and Asian

Any Other Mixed / multiple ethnic background

Asian / Asian British

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background

Black / African / Caribbean / Black British

African

Caribbean

Any other Black / African / Caribbean background

Arab

Other

Any other ethnic group

Not known/not provided

## Your choice of course(s)

Course name 1:

Start date:

Day/Eve:

Fee: £

Course name 2:

Start date:

Day/Eve:

Fee: £

Course name 3:

Start date:

Day/Eve:

Fee: £

### College Campus:

Hadlow

Medway

Canterbury

Penshurst Place

Mottingham

## Meeting your individual needs

### Do you consider yourself to have a disability?

If so, specify from the list below.

01 Visual impairment

08 Temporary disability after illness (for example post-viral) or accident

02 Hearing impairment

03 Disability affecting mobility

09 Profound complex disabilities

04 Other physical disability

10 Aspergers syndrome

05 Other medical condition (for example epilepsy, asthma, diabetes)

90 Multiple disabilities

06 Emotional/behavioural difficulties

97 Other

07 Mental health difficulty

98 No disability

99 Not known/information not provided

### Do you consider yourself to have a learning disability?

If so, specify from the list below.

01 Moderate learning difficulty

20 Autism spectrum disorder

02 Severe learning difficulty

90 Multiple learning difficulties

10 Dyslexia

97 Other

11 Dyscalculia

98 No learning difficulty

19 Other specific learning difficulty

99 Not known/information not provided

I give my permission for this information to be passed to those persons within the College who are involved in providing Additional Support, including Teaching Staff, the Exams Office and the Learning Support Staff.

Signed: \_\_\_\_\_

Date: / /

If you would like to speak to someone in confidence about your individual needs, please contact the Recruitment Office on free phone **0500 551434**.

# Part-Time Application Form



## How did you find out about the College?

- Teacher / Careers Teacher  Employee / Student / Former Student
- Radio  Exhibition / Show
- Cinema  Leaflet
- Newspaper / Magazine  Internet
- Connexions / Careers Office  Other \_\_\_\_\_
- Careers Fair  \_\_\_\_\_
- Friend or Relative  \_\_\_\_\_

## Your payment details continued

Authorising officer name: \_\_\_\_\_

Authorised signature: \_\_\_\_\_

Date: / /

Enrolments cannot be processed without a signature.

- I am not paying my own tuition fees for the reason indicated below:
- I am aged 16–18 and therefore may be exempt from paying tuition fees.
- I am aged 24 or under and interested in an Apprenticeship Scheme (Hadlow will contact you).
- I may be entitled to a Tuition Fee Concession (I understand I will still have to pay registration and material fees if appropriate) as I am in receipt of an income based benefit / or I am the unwaged dependent of an individual in receipt of one of the following.

### I attach relevant evidence of one of the following:

- Job Seekers Allowance
- Employment Support Allowance (ESA) (in the work related activity group)
- I am studying my first Level 2 qualification
- I am 19-24 and studying my first Level 3 qualification
- I would like to take advantage of the H&LP Scheme and enclose

£ \_\_\_\_\_ as the initial 25% payment of my fee.  
(see p15 for details)

## Your payment details

### Please choose the option that applies to you / how you are paying?

- I am paying my own tuition and / or registration fees as indicated below:
- CASH – PAYABLE AT COLLEGE RECEPTION**  
Our policy is to only send one reminder for payment. After 4 weeks, applications will be returned to sender if unpaid.
- BY CHEQUE – ENCLOSED**  
Made payable to "Hadlow College" and crossed A/C payee. Please write the name of the student and the course(s) on the back of the cheque.
- CREDIT / DEBIT CARD**  
Please complete card details. We take payment then destroy these details.

**Type of card:** JCB / MAESTRO / MASTERCARD / VISA / SWITCH

Amount to Charge £     .

Card holder's name: \_\_\_\_\_

Signature: \_\_\_\_\_

Start date:   /   Expiry date:   /

Issue no (Switch):

Card no:

Security code:

## Signature

**I declare that to the best of my knowledge, the information given above is correct and that if accepted. I agree to comply with the College rules and regulations I have read and understand the College policy on refunds / course cancellation. I confirm that I have been given sufficient guidance on course suitability, entry requirements, progression, financial advice and learning support. I agree to attend regularly and pay any relevant examination / registration fees. I agree to submit any required work and enter / sit any required examinations as part of the course.**

Signed (student): \_\_\_\_\_

Date: / /

To be countersigned by parent / guardian if under 18.

Signed (parent / guardian): \_\_\_\_\_

Date: / /

Print name: \_\_\_\_\_

Relationship: \_\_\_\_\_

- My employer is paying my fees

Purchase Order Number \_\_\_\_\_

– please invoice my company as follows:

Company name: \_\_\_\_\_

Address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Tel: \_\_\_\_\_

### How We Use Your Personal Information

The personal information you provide is passed to the Chief Executive of Skills Funding ("the Agency") and, when needed, the Young People's Learning Agency for England ("the YPLA") to meet legal duties under the Apprenticeships, Skills, Children and Learning Act 2009, and for the Agency's Learning Records Service (LRS) to create and maintain a unique learner number (ULN). The information you provide may be shared with other partner organisations for purposes relating to education or training.

Further information about use of and access to your personal data, and details of partner organisations is available at:

<http://skillsfundingagency.bis.gov.uk/privacy.htm>

<http://www.ypla.gov.uk/privacy.htm> and

<http://www.learningrecordsservice.org.uk/privacy-copyright.htm>

Tick any of the following boxes if you do not wish to be contacted about courses or learning opportunities for surveys and research

By post  By phone  By email

Please return to Recruitment, Hadlow College, Tonbridge, Kent TN11 0AL