



SHREWSBURY COLLEGE
OF ARTS & TECHNOLOGY

• Main Campus • Radbrook Campus •

For all full-time courses (including Work-based Learning)

For School Leavers, and others aged under 19.

APPLICATION FORM

For office use:

For those **not** applying through the Shrewsbury Joint Admissions Scheme.

1. ABOUT YOU

Title: (Mr, Mrs, Ms, etc) _____ Surname: _____ Other Names: _____

Address: _____

Postcode: _____ Home Telephone: _____ Mobile: _____

Date of Birth: _____ Age on 31 August in year of entry: _____

Have you or your parents, if you are a dependant, lived abroad in the last 3 years? YES NO

Do you have a Record of Achievement? YES NO

2. YOUR CHOICE OF COURSE(s) Please use the **FULL** course titles from the prospectus or from factsheets. For Work-based Learning courses write your preferred Occupational area (e.g. WBL Accounts).

Course choices: 1st _____ Campus: _____

2nd _____ Campus: _____

3. YOUR EDUCATION

Schools or Colleges attended:

From:

To:

Exams (Taken or to be taken)

Date:	Subject or Course	Level:	Predicted Result	Known Result

4. EQUAL OPPORTUNITIES To help us monitor our equal opportunities policy, please tick one box

Asian or Asian British: Bangladeshi 11 Indian 12 Pakistani 13 Asian Other 14
 Black or Black British: African 15 Caribbean 16 Black Other 17
 Mixed: White & Asian 19 White & Black African 20 White & Black Caribbean 21 Mixed Other 22
 White: British 23 Irish 24 White Other 25
 Chinese 18 Any Other 98 Not Known / Not Provided 99

Do you have any physical, medical or learning difficulties (e.g. dyslexia) for which you may need support? YES NO
 If YES, please give details: _____

You may discuss your specific needs in confidence at your interview.

Do you give permission for us to disclose appropriate information to relevant staff? YES NO

5. YOUR DETAILS

Please give information here about your interests, experiences of work, career ambitions and achievements.

Have you ever been convicted of a criminal offence, spent or otherwise? If yes please give details below:

Please sign here: _____ **Date:** _____

If you are under 18 on 31 August in the year of entry we also need the signature of a parent or guardian to confirm they support your application.

Signature of Parent/Guardian: _____ **Date:** _____

Name (in block capitals) _____

6. YOUR CONFIDENTIAL REFERENCE This should be completed by your Head of Year or if you have left school by your current employer. Please enter predicted results overleaf and write here about the applicant and their suitability for their chosen course(s).

• Attendance	>90%	80% - 90%	Less than 80%
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	GOOD	AVERAGE	POOR
• Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Behaviour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Ability to work in a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Promptness with handing in work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please comment if any ticks are given for 'poor' or 'less than 80%'

Has support been provided in school? YES NO If yes please give details:

Signature of Referee: _____ **Date:** _____

If you are applying for a WORK BASED LEARNING PROGRAMME please also supply the following information:

National Insurance Number: _____

Have you arranged a work placement? YES NO If YES, please give details:

Employers Name: _____

Employers Address: _____

Thank you for your application. Please contact Central Admissions if you need any more help.

Telephone Shrewsbury 01743 342342, 342346 or 342557