	Applicants should supply rel	EVANT INFORMATION ON BOTH SIGNATE OF BIRTH AND COUNTRY O	des of this form.		SPARSHOLT
Plo	(Please complete in BLOCK C		nt 2016 □ Se	pt. 2017 🛛	
		·	•		
	RENAMES:				
Nat	ional Insurance Number:		_ Nationality:		
Cou	Intry of Residence (for last 3 years):		If less than 3 years please	e state date of entry to UK:	
Peri	manent Address:				
	No Home:				
Eme	ergency contact: Name:		Tel	ephone:	
□ □ □ □ □ □ □	ite 31. English / Welsh / Scottish / Northerr 32. Irish 33. Gypsy or Irish Traveller 34 Any Other White Background ian / Asian British 39. Indian 40. Pakistani 41. Bangladeshi 42. Chinese 43 Any other Asian background	n Irish / British	 35. White 36. White 37. White 37. White 38 Any or Black / Africa 44. Africa 45. Caribb 46 Any or Other ethnic 47. Arab 	ther Mixed / multiple ethnic n / Caribbean / Black Britis n pean ther Black / African / Caribbe	h
Do	you have a disability, health p	roblem or learning di	fficulty? 🗆 Ye	s 🗆 No	
(If Y	ES please tick all that apply and cire	cle the main one that app	olies to you)		
	Visual impairment Hearing impairment Disability affecting mobility Mental health difficulty Profound/complex disabilities* Temporary disability after illness o	AspergersSocial and	ectrum disorder Syndrome emotional difficulties	 Other medica (eg epilepsy, a Moderate lear Severe learnin 	isthma, diabetes) ning difficulty
* Pl	ease tick box and provide further de	tails:			
	ase list any support needs that you h uld you like a member of the Learne		-		
Plea	ase indicate where you first heard of S	parsholt College:			
	Exhibition / Show (1) Career office (4) Friends (7) Sparsholt Open Day (10) Website (13)	□ Work exp □ Newspap	lio (2) vent / talk (5) verience (8) ver / Magazine (11) lease specify	 School visit Contacts at Industry co Previous co 	home (6) ntact (9)
	l do not wish to receive information l do not wish to be contacted by or			th courses relevant to my pr	ogramme of study
со	URSE DETAILS: Please use this fo	rm for HE courses only; N	OT Further Education or	Short Courses.	
Cou	rse applying for:				
For	office use only: Interview date:				

If you believe that your previous qualifications and experience could provide credit towards the programme you have applied for please tick \Box

Do you have any unspent criminal convictions	? Yes		No	
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If 'yes' please give more details

The College is keen to support students to help them succeed and having a criminal conviction will not necessarily prevent you from taking up a place at Sparsholt College. However failure to disclose a criminal conviction may jeopardise your place.

Last educational establishment attended: ____

Educational qualifications (please give as much information as possible including any qualifications for which results are not yet known):

Awarding Body e.g. BTEC, City & Guilds	Type/level e.g. GCSE, A level	SUBJECT	Grade (or predicted grade)	Date Awarded (month/year)

Relevant Professional Experience / Information:

Personal Statement: please attach your personal statement to this application (max. 500 words).

Referees - Please give 2 x full names and addresses as references may be requested.

We require your current or recent employer/work provider plus one other personal referee.

Name of Employer/Work Provider/Personal Referee	Name of Employer/Work Provider/Personal Referee
Name of referee if different	Name of referee if different
Address	Address
Post code	Post code

Declaration: I certify that the information provided on this form is correct and I hereby apply for admission to Sparsholt College Hampshire.

______ (Student) Date _

Signed _

When complete please forward to:

Admissions, Sparsholt College Hampshire, Winchester, SO21 2N	١F
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Tel: 01962 797269

email: courses@sparsholt.ac.uk

_____ From: _____ To: ____

DATA PROTECTION ACT: This symbol tells you that information you provide is being collected and used by the College and certain other bodies. More information is available from the Student Services Office.