CITYSKILLS ECCLES SIXTH FORM COLLEGE FutureSkills at MediaCityUK

PENDLETON SIXTH FORM COLLEGE WORSLEYCOLLEGE

Please return the completed Application Form to:
Admissions, Salford City College, Frontier House, Merchants Quay, Salford, M50 3SR

Adult Application Form

If you require help completing this Application Form or require it in other formats or languages, please contact **Admissions on 0161 631 5000.**

Please complete in BLOCK CAPITALS

Title (please circle) Mr / Mrs / Miss / Ms

Surname .....

Forename .....

Date of Birth .....

Male / Female (please circle)

Telephone Number .....

Address .....

.....

.....

Postcode .....

E-mail .....

Mobile .....

☐ **If you have a physical or learning disability which we may be able to help you with or you require extra support, tick this box.**
If you tick this box Student Services will contact you to discuss your needs.

Have you been resident in the UK or the EU for the past three years? Yes ☐ No ☐

Do you have a physical or learning disability which we may be able to help you with? Yes ☐ No ☐
(If you tick 'yes' Student Services will contact you to discuss your needs)

Course(s) you are applying for

Subject(s)	**Level** (e.g. GCSE, Access, Foundation)	**Career plans**

Examinations already taken or to be taken

Subject(s)	Examination eg. GCSE, GNVQ	Grade or estimated grade	Year taken/ to be taken

Ethnicity

11 Asian/Asian British - Bangladeshi		19 Mixed - White & Asian	
12 Asian/Asian British - Indian		20 Mixed - White & Black African	
13 Asian/Asian British - Pakistani		21 Mixed - White & Caribbean	
14 Asian/Asian British - Other Asian Background		22 Mixed - Other Mixed Background	
15 Black/Black British - African		23 White - British	
16 Black/Black British - Caribbean		24 White - Irish	
17 Black/Black British - Other Black Background		98 Other Background	
18 Chinese			

Please give any further information in support of your application. You may like to include any voluntary work, hobbies, interests or work experience.

For office use only

Date recieved:

Acknowledgement sent:

Interview date:

I agree to the college processing the personal data contained in this form or other data which the college may obtain from me whilst I am a student. I agree to the processing of such data for any purposes connected with my studies, for references or my health and safety whilst on the premises or any other legitimate reason.

Signature _____

Date _____