# EU Direct Application Form



Please ensure all sections are fully completed.

1 Personal detai	ils				
Title	Surname/family name of applicant (BLOCK CAPITALS)				
First name(s)					
Previous surname (if changed	0				
Gender: Male Fen	nale Date of birth				
Correspondence address of applicant – we are unable to issue offers without the applicant's contact details					
	Postcode				
Contact telephone no.	Mobile telephone no.				
Email					
Agent name	Agent code				
Email address of agent					
2 Fee status and	d additional supporting information				
Please attach a copy of	f your current passport and, where applicable, any Home Office documentation				
Country of birth	Nationality				
Country of permanent resid	dence				
Applicants not born in the IDate of first entry to the EU	European Union please state U: Date of most recent entry to the EU:				
Date from which you have	been granted permanent residence in the EU:				
Payment of fees Who is expected to pay yo	our fees? (Research Council, Local Education Authority (LEA), yourself, family member, employer, other):				
If an LEA, which one?					
Ethnic origin (please tick of	one):				
White Black Caribbe					
Asian Bangladeshi   Asian Chinese   Asian other   Mixed   Other   Prefer not to say					
Residential category:					
UK Citizen or EU National	Refugee				
EEA or Swiss National	Humanitarian Protection or similar				
Child of a Turkish worker	Settled in the UK				
3 Details of cou	rse(s) for which you wish to apply				
Course name					
Campus					
Mode of Study (Full-time/Part-time)					
Start date					

Level of Entry (Year 1, Year 2)

4 Additi	onal needs				
No disability		ty:  Visual Impairment heelchair User Other	· · · —	Long-term Hea	_
Please give fu	rther details of any su	pport needs which might	necessitate special ar	rangements or fac	ilities:
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		establishments att		++ondod	
	nd addresses of the R	ast two educational establ		1	l <del>-</del>
Establishment			Full- or part-time	From (mm/yy)	To (mm/yy)
6 Qualif	ications				
					a. Diagga attack
	of your certificates or	ave achieved followed by transcripts.	qualifications that you	are currently takin	g. Please attach
Level	Subject	Data (see )	Institution		Result
eg GCSE/Degree	Subject	Date (mm/yyyy)	Institution		nesuit
English Lang	uage Qualification				
7 Other	information				
	riously applied to the Un	iversity Yes \( \Boxed{\omega}  \text{No } \Boxed{\omega}			
Criminal convic					
	nal statement				
		nt in your own words writ perience. Please continue			or applying to the
Journal and all	caming arry rollovarit GA	porionido. Fiodos continue	on a sopurate shoot as		

9 Details of referees	

Please provide the contact details of two referees who can support your application. These can include a teacher or employer.

	Referee no. 1	Referee no. 2
Name		
Company		
Address		
Telephone		
Email		

## 10 Data Protection and Declaration

I consent to the University of Bedfordshire's use of my personal data, including sensitive data, to allow the University to fulfill its administrative obligations and to process my application. The University shall duly observe its obligations under the General Data Protection Regulations and any resulting legislation which arise from this application. The information I provide on the application form will be used for the following purposes, to:

- determine my eligibility for entry to the University of Bedfordshire.
- provide me with relevant information to assist me in joining the University (including information about Open Days, scholarships/discounts and fees, enrollment at the University, my course, my faculty and the University's facilities, the local area, accommodation providers engaged through the University's approved accommodation system, internships and career opportunities, visa advice and travel advice).
- enable the University of Bedfordshire to compile statistical reports.
- enable the University of Bedfordshire to initiate my student record.

I consent to the University sharing this information with:

• the relevant government departments. This includes: Higher Education Statistical Agency, UK Visas and Immigration, Higher Education Access Tracker (HEAT), Office for Fair Access and the Office for Students, Student Loan Company, Department for Education and its agencies for the

administration of bursaries for teacher training (for students on professional programmes, Early Years Teacher Status and English as a Foreign Language), Nursing and Midwifery Council, the Health and Care Professions Council and the General Medical Council (for students on nursing, midwifery, social work or youth courses), NHS Bursaries Unit (for students on NHS-funded courses). Health Education England and Health Education Thames Valley, and Frontline (a Government funded body which commissions social work training)

- Public Sector regulatory bodies such as The British Council and the Office for Standards in Education
- bodies which are responsible for professional accreditation of my course, if applicable
- the Police or other authority in relation to crime prevention or investigation, or in association with the Government's Prevent agenda
- accommodation providers (where applicable) who are engaged through the University's approved accommodation system; Liberty Living and Student Village
- UCAS (through the completion of a Record of Prior Acceptance (RPA) in compliance with the UCAS Undergraduate Application and Recruitment Policy), and NARIC (in order to establish the equivalent level and verify a qualification if applicable)
- John Smith's bookshop and Aspire Gym so that if, I am eligible to receive a BedsMoney card, I can use it to purchase learning materials or gym membership, respectively
- any partner of the University which is delivering the programme or whose premises are used for the delivery of a programme, for which I have registered on with the University
- my sponsor (if any) in order to confirm sponsorship and invoice for payment of fees
- my referees as listed in Section 9 of this application form
- my representative/agent outside the EEA or in my home country (if applicable) as listed in Section 1 of this application form

In the event that I do not register as a student of the University of Bedfordshire, the University will retain my personal information for the rest of the academic year for which I have applied plus one further academic year. In the event that I do register, my data will be managed as per the student agreement which I will sign upon registration.

Signature: Full name:

I hereby certify that all of the above information is correct and complete, and I wish to apply for admission as a student of the University. I also declare that, if admitted I shall conform to all the Rules and Regulations of the University of Bedfordshire. I understand that the submission of any misleading information during the admission process could lead to the immediate cancellation of my application and the withdrawal of any offer made. In the event that I register as a student of the University of Bedfordshire, I hereby undertake to pay, as and when due, all University fees. I grant permission to the University of Bedfordshire to request information pertaining to my current or previous visa status (if applicable) in the UK from the Home Office, if necessary.

Signature: Date:

# **Notes for Guidance**

#### General

Before completing the form, please ensure that you read these notes carefully. You should also read the current University of Bedfordshire literature relating to the course(s) in which you are interested.

### Section 1 Personal details

Please complete this section in BLOCK CAPITALS.

## Section 2 Fee status

Please state your country of permanent residence and give details of who you expect to pay your fees for the proposed course.

## Section 3 Details of course(s) for which you wish to apply

Level of Entry – If you qualify for advanced entry to your chosen course of study please submit your current academic qualifications such as a transcript. Please also submit, where possible, the relevant unit's syllabus. If you feel your professional experience makes you eligible for advanced entry please submit evidence. If you wish to indicate an order of preference for your course choices you may do so. If you do not indicate an order of preference then it will be assumed that you have none.

### Section 4 Additional needs

**England** 

Describe your condition and, where it is not obvious, indicate whether you have special needs.

### Section 5 and 6 Academic History

Enter the exact subject name used by the examining body and the name of the examining body in full. If you have qualifications obtained outside the UK, you should give details of all examinations taken as preparation for entry to higher education (e.g School and Higher School Certificate, Apolytirion, Baccalaureat). Applicants with qualifications obtained in a language other than English, must attach a certified English transcript to the form.

## **Section 9 References**

Please supply the name and contact details of an academic reference from your current or previous studies. This need not be related to the course you are applying for. We will contact referees if required.

If you are applying for an MBA you may need to submit a professional reference. Please see **unibeds.info/MBAAD** for more details.

## Section 10 Data Protection and Declaration

We require your consent for us to store and process the information you supply on this form. We cannot process your application without your consent.

www.beds.ac.uk

DOCUMENT CHECKLIST - DO NOT SEND ORIGINAL DOCUMENTS				
Please make sure you include the following documents with your application				
Application Form and Data Protection/Declaration signature				
Copies of your Academic Certificates/Transcripts				
Copy of your English Language Examination Results				
Copy of current passport/EU ID Card				
Please return the completed form to: International Office University of Bedfordshire University Square Luton Bedfordshire LU1 3JU	Email: teameu@beds.ac.uk			