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| **POSTGRADUATE COURSES APPLICATION FORM INTERNATIONAL 2017-18** |



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| **ID Number** | *For HAU office use only:* |

**Please complete all parts of the form and, if you are unsure about any section, please contact the**

**Postgraduate Officer. Please continue on a separate sheet if required. Details of our admissions policy can be found at:** [**www.harper-adams.ac.uk/postgraduate/**](http://www.harper-adams.ac.uk/postgraduate/)

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| **Details of the course for which you wish to apply** | | | |
| **Course Title** | **Qualification**  PgC/PgD/MSc | **FT or**  **PT – 2-4 yrs** | **Year of entry**  *(e.g. 2015/16)* |
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| **Personal details** | | |
| **Surname/Family name:** | **Forenames:** | |
| **Official (full) name:** | **Preferred forename:** | |
| **Title:** Mr Mrs Miss MsOther *(please state)*  *(please tick)*  | **Date of birth:** | **Gender:** Male Female  *(please tick)*  |
| **Home address:** | **Postal address** *(if different from home address)***:** | |
| **County** *(or country if not UK)***:** | **County** *(or country if not UK)***:** | |
| **Postcode:** | **Postcode:** | |
| **Telephone:** | **Telephone:** | |
| **Mobile Telephone:** | | |
| **Email address:** | | |
| **SKYPE address for telephone interview:** | | |

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| **English Language Qualification**  **A minimum of 6 IELTS is required for your application to be considered**  **Please see** [**www.harper-adams.ac.uk/international/english-language.cfm**](http://www.harper-adams.ac.uk/international/english-language.cfm)  **for our English Language requirements**  **Please include a copy of your proficiency test results** | | |
| **IELTS** | **Date of Test** | Results |
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| **Previous Education** | | | | | | | |
| **Previous educational establishments attended** | | | **Dates** *(from/to)* | | HESA Student reference number | | |
|  | | |  | | (HUSID): | | |
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|  | | |  | | Scottish candidate number (SCN): | | |
|  | | |  | | (if applicable) | | |
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| **Qualifications completed & pending** | | | *(Please include everything from GCSE level onwards, if the qualification is still to be completed, please enter* **PENDING** *in the grade column. Please include copies of certificates)* | | | | | | |
| **Level** | | **Subject** | | | **Grade** | | **Date** | **Awarding body** | |
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| **Other Details** | |
| **What was your surname at age 16?** | **Have you ever been in care for 3 months or more on or after your 16th birthday?**  Yes No  |
| **Do you have any *relevant* criminal convictions?** The University has a duty of care to all learners; therefore all applicants are required to declare criminal convictions. This is treated as sensitive data and will be held under the Data Protection Act and dealt with in accordance with the Admissions Policy. *(Fixed penalty driving offences are excluded)*  Yes No *(If yes, details should be given in a sealed envelope addressed to the Academic Registrar)* | |

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| **Do you have a disability which could cause you difficulty during your course?** *(Please tick):*   **A** No disability | | | |
|  **B** Social/communication impairment e.g. Asperger’s, autism | | | |
|  **C** Blind or serious visual impairment uncorrected by glasses | | | |
|  **D** Deaf / hearing impairment | | | |
|  **E** Long standing illness or health condition e.g. diabetes, epilepsy | | | |
|  **F** Mental health condition e.g. depression, anxiety disorder | | | |
|  **G** Specific learning difficulty e.g. dyslexia | | | |
|  **H** Physical impairment / mobility issues | | | |
|  **I** Disability, impairment or medical condition not listed above | | | |
|  **J** Two or more impairments / disabling medical conditions | | | |
| **What is your nationality?** | **What is your country of birth?** | **What is your first language?** | |
| **What is your country of domicile?** (the country where your permanent / home address is) *(Please tick):*  England  ENG Scotland  SCO Wales WAL Northern Ireland  NI  Isle of Man  IM Jersey  JE Guernsey(including Alderney, Sark)  GG  **If other please specify:** | | | |
| **Payment of Fees** | | | |
| Who do you expect to pay your fees? *(i.e. Research council, yourself, employer)*: | | | Fee Status *(as you believe it to be)*:  Home  EU  Overseas |
| Have you been resident in the EU for the last 3 years? *(Please tick*): Yes No  | | | Date from which granted residence in the EU *(if applicable)*: |

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| **Personal Statement** | *(Please provide a written submission to assist the course team when assessing your application, include details such as relevant work experience, extra-curricular activities and anything you feel appropriate to highlight why you wish to study the course).* |
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| **How did you hear about Harper Adams?** | |

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| **Employment History** (Please include details of work experience and paid employment) | | | | |
| **Job title/nature of work** | **Employer/Organisation** | **From** | **To** | **FT/**  **PT** |
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| **References** | **Please ask your referees to send your reference(s) directly to** [**postgraduate@harper-adams.ac.uk**](mailto:postgraduate@harper-adams.ac.uk) **and could you also complete details below.**  **One must be an academic reference.**  ***This is to enable us to speed up the application process.***  ***If it is not possible to provide a reference with your application then***  ***this will be a condition of your offer if successful.*** |

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| Name:  Address:  Telephone:  Email: | Name:  Address:  Telephone:  Email: |

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| **Declaration**  I confirm that, to the best of my knowledge, the information provided in this form is correct and complete.  I note that the surname and forename(s) taken from this form and agreed as correct, will be those used on my final award certificate and transcript and other University documentation, should I become a registered student.  I confirm that I am personally liable and responsible to pay the annual tuition fees and other charges for my studies in accordance with the Universities Financial Regulations or to arrange for my sponsor to pay the tuition fees and other charges. In the event that my sponsor refuses to pay all or part of my tuition fees and other charges, I agree to pay any shortfall between the amount paid by my sponsor and the total amount of fees due to the University. I accept that failure to adhere to the above will result in my automatic exclusion from the University within the meaning of the Universities Financial Regulations.  I understand that the data I provide on this application form will be held and processed in accordance with the Data Protection Act 1998 and that I may be withdrawn if undeclared criminal convictions come to light. | |
| **Applicant’s signature:** | **Date:** |

**Please forward your completed form to:** Heather Hogan

Taught Postgraduate Officer

Harper Adams University

Newport

Shropshire

TF10 8NB

*For HAUC office use only:*

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| **Checked by:** | **Date:** |