

# Application Form

SECTION

1

## OFFICE USE ONLY

Applicant number

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Date received

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Please return this Form, in the envelope provided, to: **Central Recruitment, Thames Valley University, St Mary's Road, Ealing, London W5 5RF**

If you would like additional information or help with filling in this Form, please contact the Learning Advice Centre on **0800 036 8888**.

Details entered onto this Form will be transferred to computer. This information will be treated confidentially in accordance with the Data Protection Act, 1998.

## Your choice of course (please use CAPITAL letters)

Please state which course you wish to study (including Stage, Part, Phase or Level, where relevant).


Please indicate your proposed start date.

M	M	Y	Y	Y	Y
---	---	---	---	---	---

Some courses may be offered at Ealing, Slough and Reading. Where this is the case, please indicate (✓) your first choice of campus.

Ealing  Slough  Reading

Some courses are available in several modes of study. Where this is the case, please indicate (✓) your preferred mode of study.

Part-time, day  Part-time, day and evening  Full-time   
Distance/open learning  Part-time, evening

## Personal Details (please use CAPITAL letters)

Title (eg Ms/Mrs/Mr/Dr)

--

Surname (Family name)

--

Previous surname if changed

--

First name(s)

--

Gender

Male  Female

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Home address


Telephone

	Postcode										
--	----------	--	--	--	--	--	--	--	--	--	--

Home

Work

e-mail

Mobile

Nationality

--

Country of birth

--

Country of domicile or permanent residence

--

## Non European Union (EU) Applicants

Please note that non-EU students are liable for the full costs of their study programmes.

**Applicants NOT born in the EU, please state:**

Date of first entry to the EU

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Date of most recent entry to the EU

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Date from which you have been granted:**

Exceptional leave to remain in the UK

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Full refugee status in the UK

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Indefinite leave to remain in the UK

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

**Date on which your student visa was issued (if applicable)**

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

## Paying for your course

**If you are applying for a short course or a foreign language course, you need only complete Section 4, sign and date the Declaration in Section 5 and complete Section 6.**

Who will pay your fees?

Research Council  Family member   
 Local Education Authority (LEA)  Employer\*   
 Yourself  Other

*\*if your employer is paying your fees, please enclose a sponsor letter with this Application Form.*

If an LEA, which one?

Please indicate (✓) if you have previously received an educational award from UK public funds?

Yes  No

If Yes, please provide details

Funding body														
Course														
Dates of attendance	From	M	M	Y	Y	Y	Y	To	M	M	Y	Y	Y	Y

## Previous education and work experience

If you are currently attending, or have previously attended TVU, please give the title of the course you are undertaking or have undertaken.

Course title

Dates of attendance

From       To

For monitoring purposes, please indicate (✓) whether you have previously taken any higher education course (degree, HND or higher level) in the UK.

Not previously studied an HE course in the UK

Previously attended an HE course at another UK institution

Returning to complete an HE course started at another UK institution after a period away

Transferring from an HE course at another UK institution

Wherever possible, TVU offers credit for any relevant prior learning and experience which you may have. Please indicate (✓) if you would like details of our Accreditation of Prior Learning/Experiential Learning Scheme.

Please outline any work experience you have had (both paid and unpaid) which you consider relevant to your chosen course of study.

Job title

Name of organisation

From       To

Duties

Job title

Name of organisation

From       To

Duties

Job title

Name of organisation

From       To

Duties

Please include details of any special responsibilities. Continue on a separate sheet if necessary.



# Equal Opportunities Monitoring

SECTION

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Please note, this Section of the Form will be detached before your application for a course is considered.

Please use CAPITAL letters

Surname (Family name)

Date of Birth

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Please use exactly the same format of your surname as you have used in Section 1 of this Form.

## Ethnic Origin

TVU is committed to the pursuit of equality and social justice and has a policy of equal opportunities. Please help us to evaluate the effectiveness of this policy.

Please indicate (✓) which you feel best reflects your ethnic origin.

- |                                    |                          |    |                                      |                          |    |
|------------------------------------|--------------------------|----|--------------------------------------|--------------------------|----|
| White (British)                    | <input type="checkbox"/> | 11 | Asian or Asian British – Bangladeshi | <input type="checkbox"/> | 33 |
| White (Irish)                      | <input type="checkbox"/> | 12 | Chinese                              | <input type="checkbox"/> | 34 |
| White (Scottish)                   | <input type="checkbox"/> | 13 | Asian other                          | <input type="checkbox"/> | 39 |
| Irish Traveller                    | <input type="checkbox"/> | 14 | White & Black – Caribbean            | <input type="checkbox"/> | 41 |
| Other white background             | <input type="checkbox"/> | 19 | White & Black – African              | <input type="checkbox"/> | 42 |
| Black or black British – Caribbean | <input type="checkbox"/> | 21 | White & Asian                        | <input type="checkbox"/> | 43 |
| Black or black British – African   | <input type="checkbox"/> | 22 | Other mixed background               | <input type="checkbox"/> | 49 |
| Black other                        | <input type="checkbox"/> | 29 | Other ethnic background              | <input type="checkbox"/> | 80 |
| Asian or Asian British – Indian    | <input type="checkbox"/> | 31 | Information refused                  | <input type="checkbox"/> | 98 |
| Asian or Asian British – Pakistani | <input type="checkbox"/> | 32 |                                      |                          |    |

## Disability

Thames Valley University welcomes and supports students with learning difficulties and disabilities.

To help us to provide appropriate support services, please indicate (✓) which term is descriptive of your disability.

- |   |                          |    |                                       |                          |    |
|---|--------------------------|----|---------------------------------------|--------------------------|----|
| No Disability   | <input type="checkbox"/> | 00 | Require personal care support         | <input type="checkbox"/> | 05 |
| Dyslexia  | <input type="checkbox"/> | 01 | Mental health difficulties            | <input type="checkbox"/> | 06 |
| Blind/partially sighted   | <input type="checkbox"/> | 02 | Unseen disability eg diabetes, asthma | <input type="checkbox"/> | 07 |
| Deaf/hearing impairment   | <input type="checkbox"/> | 03 | Multiple disabilities                 | <input type="checkbox"/> | 08 |
| Wheelchair user/mobility disability                               | <input type="checkbox"/> | 04 | Autistic Spectrum Disorder            | <input type="checkbox"/> | 10 |
| A disability or special need not listed above (please specify) 09 |                          |    |                                       |                          |    |

Please indicate any support TVU can provide to help you in your studies or examinations.


## Criminal Conviction(s)

This part of the Form **MUST** be completed.

If you do not tick either the 'Yes' or 'No' box, we will not process your application. In such circumstances, we will contact you to get the information, but this will delay your application.

Do you have any criminal conviction(s)? Yes  No

You must tick the YES box if you have a conviction, **NOT** including:

- a motoring offence that you received a fine or three penalty points for;
- or

- a spent sentence (as defined by the Rehabilitation of Offenders Act 1974), except for certain courses.

**Please be aware that for certain courses, particularly in teaching, health, social work and other courses involving work with children, you must tell us about ANY criminal conviction(s), including spent sentences and cautions.**

### NOTES

- If you are not sure whether to tell us about a previous conviction, you should get more advice from your local Citizens' Advice Bureau or Probation Service, or from the National Association for the Care and Resettlement of Offenders (NACRO). You can also contact a solicitor, but you may have to pay for legal advice.
- If you are convicted of a criminal offence, after you have applied, you **MUST** let us know immediately.
- If you are serving a prison sentence, you must tick the 'Yes' box. You must also give the prison address as your postal address on the front page of this Form, and a Senior Prison Officer must support your application.

## References

Many of our courses, particularly those at postgraduate level, require you to provide 2 references. Please check whether the course you are applying for, has this as a requirement for entry.

Wherever possible, one Referee should relate to your current or recent work and one to any current or recent study you have undertaken.

Please give one copy of the Reference Form enclosed to each Referee to complete and return to TVU in the envelope provided.

**Please ensure that you fill in your name and the course you are applying for on the Reference Form before despatch.**

### Reference 1

Name
Position
Address
<input type="text"/>
Postcode <input type="text"/>
Daytime telephone number
e-mail

### Reference 2

Name
Position
Address
<input type="text"/>
Postcode <input type="text"/>
Daytime telephone number
e-mail

## Declaration

To the best of my knowledge, the information I have given on this Form is correct.

Signature of applicant

Date

# Marketing information

SECTION

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Please return this Form, in the envelope provided, to: **Central Recruitment, Thames Valley University, St Mary's Road, Ealing, London W5 5RF**

Course applied for

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**Please indicate the importance of various sources of information in helping you to choose your course at TVU.**

	1	2	3	4
<b>1 – Very important</b>				
<b>2 – Quite important</b>				
<b>3 – Not that important</b>				
<b>4 – Unimportant</b>				
TVU Website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TVU Prospectus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TVU Course-specific brochure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal experience of study at TVU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Word-of-mouth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TVU Advice Session or Visit Day	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Careers Publication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Direct mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other Website or on-line directory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Educational Exhibition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ECS/British Council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Agency	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course Directory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advert (Newspaper/Journal)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, please specify:				

**How important were the following factors in your choice of course at TVU?**

	1	2	3	4
<b>1 – Very important</b>				
<b>2 – Quite important</b>				
<b>3 – Not that important</b>				
<b>4 – Unimportant</b>				
Relevance of course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Only place that offers the course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course duration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning method	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Course reputation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Entry requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexible study options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional accreditation/industry recognition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment prospects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fees/cost of study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other, please specify				

Any other comments?


**Thank you for your feedback.**

# Reference Form 1

Applicant's name

TO BE COMPLETED BY THE APPLICANT

Course applied for

TO BE COMPLETED BY THE APPLICANT

**The above has quoted you as a Referee in his/her application to Thames Valley University.**

*Thank you for taking the time to complete this reference.*

How long have you known the applicant and in what capacity?

*As many candidates apply, selection is often difficult. Your comments will make a significant contribution to assessing the applicant.*

What do you consider to be the applicant's main strengths and weaknesses?

Strengths

Weaknesses

*Your comments will be treated in the strictest confidence. Please let us know if you would like this reference to be acknowledged.*

Please tick (✓) Yes  No

What is your overall opinion of the applicant's suitability for this course?

PTO

# Reference Form 2

Applicant's name

TO BE COMPLETED BY THE APPLICANT

Course applied for

TO BE COMPLETED BY THE APPLICANT

**The above has quoted you as a Referee in his/her application to Thames Valley University.**

*Thank you for taking the time to complete this reference.*

How long have you known the applicant and in what capacity?

*As many candidates apply, selection is often difficult. Your comments will make a significant contribution to assessing the applicant.*

What do you consider to be the applicant's main strengths and weaknesses?

Strengths

Weaknesses

*Your comments will be treated in the strictest confidence. Please let us know if you would like this reference to be acknowledged.*

Please tick (✓) Yes  No

What is your overall opinion of the applicant's suitability for this course?

PTO

Please return this Form, in the envelope provided, to: **Central Recruitment, Thames Valley University, St Mary's Road, Ealing, London W5 5RF**

To help us further with our assessment of this candidate, it would be helpful if you would rank the applicant relative to his/her peer group eg, relative to other, similarly qualified employees, or to fellow undergraduates, or to fellow postgraduates.

Peer group for comparison:

Capacity % rating in peer group	Outstanding 95%+	Excellent 90%–94%	Very good 75%–89%	Good 60%–74%	Average	Below average	Not known
Intellectual/academic							
Fluent & logical communication							
Orally							
Written							
Ability to work hard							
Perseverance							
Leadership							
Creativity							
Social skills							

Is there any other information which you feel is relevant to this application?  
Please continue on a separate sheet if necessary.

Name

Position

Address

Postcode

Telephone  Fax

e-mail

Signature  Date

Please return this Form, in the envelope provided, to: **Central Recruitment, Thames Valley University, St Mary's Road, Ealing, London W5 5RF**

To help us further with our assessment of this candidate, it would be helpful if you would rank the applicant relative to his/her peer group eg, relative to other, similarly qualified employees, or to fellow undergraduates, or to fellow postgraduates.

Peer group for comparison:

Capacity % rating in peer group	Outstanding 95%+	Excellent 90%–94%	Very good 75%–89%	Good 60%–74%	Average	Below average	Not known
Intellectual/academic							
Fluent & logical communication							
Orally							
Written							
Ability to work hard							
Perseverance							
Leadership							
Creativity							
Social skills							

Is there any other information which you feel is relevant to this application?  
Please continue on a separate sheet if necessary.

Name

Position

Address

Postcode

Telephone  Fax

e-mail

Signature  Date