

APPLICATION FORM



PERSONAL DETAILS

Please provide your full name i.e as shown on your passport or birth certificate for your application. There is an option to add a preferred name if you wish below.

Surname:	Male <input type="checkbox"/> Female <input type="checkbox"/>
First Name(s):	Preferred Name:
Nationality:	
Date of Birth:	Age on 31/08/20:
Permanent Address:	
	Postcode:
Home Telephone:	Mobile:
Email Address (please print clearly):	
Have you been resident in the United Kingdom for the past 3 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If 'no' please indicate your current UK residency status:	
How did you hear about Portsmouth College?	

PARENT/GUARDIAN DETAILS

We may contact a parent/guardian in regards to your application.

Name of Parent/Guardian:	
Contact Number:	Email Address:

YOUR CHOICE OF COURSES: Please list at least three courses you are interested in studying.

If you are uncertain about some of your choices, don't worry. You will have several chances to discuss your options with our staff. You can contact us after your initial application and interview to request changes to your choice of subjects.

1.	4.
2.	5.
3.	6.

QUALIFICATIONS

Please list details of the subjects/qualifications you have already achieved or will have completed by June 2020 (e.g. GCSE Maths, BTEC Level 2 Business Certificate). Under 'grade' please list actual or predicted grade.

Year	Subject and Qualification	Grade	Year	Subject and Qualification	Grade

YOUR CAREER AIMS

Please indicate any ideas you have for further study after college, and/or for your career.

--

SECONDARY SCHOOLS OR COLLEGES ATTENDED SINCE SEPTEMBER 2015 *(most recent first)*

School or College

From:

To:

.....
.....

INTERESTS AND ACTIVITIES

Please tell us about your leisure interests and activities, work experience or part-time/voluntary employment. These might be relevant to your choice of course and/or non-academic activities in College.

.....
.....

SUPPORT AVAILABLE TO YOU *(Information you provide will be treated in the strictest confidence)*

Do you have an Education, Health and Care Plan? Yes No

Do you have access arrangements in examinations? Yes No

Do you have a disability, learning or wellbeing support need? Yes No

If you have ticked 'yes' please tick the boxes that apply to you in the following questions:

Learning need (e.g. Dyslexia, Dyscalculia, Wellbeing Support)? Yes No

A health condition (e.g. epilepsy, diabetes, or other serious condition)? Yes No

Physical or sensory disability (visual, hearing or mobility impairment)? Yes No

If you have further information about your disability or learning support need, please specify:

.....
.....

We use this information to enable students to integrate well and fulfil their potential.

We would welcome the opportunity to discuss in advance how we can help those requiring support.

Please contact **The Focus Team (Academic and Learning Skills)** in the first instance on **02392 344374** or focus@portsmouth-college.ac.uk

PORTSMOUTH COLLEGE DATA PROTECTION STATEMENT AND PRIVACY NOTICE

Portsmouth College is the Data Controller of personal information provided by you on this form. All personal information collected will be processed in accordance with the Data Protection Act 2018 for the purpose of helping you to apply for a place at College. When you enrol, we will continue to process your personal information, in general for the purpose of providing your education or training. You can learn more about how we process your personal information by reading our Student Privacy Notice at <https://www.tpc.ac.uk/privacy/>

Personal information for students aged 19 or under at the beginning of the academic year (or aged up to 25 for students with Learning Difficulties and Disabilities and Looked After Children) will be shared with Portsmouth City Council (PCC) in order to satisfy the statutory duties placed upon both PCC and the College under the Education and Skills Act (2008) and to support our common goals of keeping young people safe, while delivering the best possible educational outcomes. Personal information may also be shared with your previous school.

Student signature:

Date:

WHAT HAPPENS NEXT?

Please return your completed application form to:

Admissions, Portsmouth College, Tangier Road, Portsmouth, PO3 6PZ
(email: admissions@portsmouth-college.ac.uk)

You will be invited to an 'initial enrolment' interview with an appropriate member of staff. This will cover your course choices, entry requirements, employability & enrichment opportunities, student finance & travel arrangements and information on the stages leading up to enrolment in **August 2020**.

