**Application for Undergraduate Studies**

**Admissions Office Admissions Tutor Interview Reference Decision**

## Please complete clearly.

|  |
| --- |
|  |
|  |
|  |

**This form will be photocopied.**

**Please return to:**

[**applications@salford.ac.uk**](mailto:applications@salford.ac.uk)

**Please note we can only accept applications via this email address**

## Applicant Number (for office use only).

T +44 (0)161 295 4545

[www.salford.ac.uk](http://www.salford.ac.uk/)

1. Title: Mr/Mrs/Miss/Ms/Dr
2. Surname/Family name:
3. Other name(s):
4. Gender: M / F
5. Postal address for correspondence:

Country: Postal Code: E-mail address: Telephone number: Fax:

1. Permanent home address (if different from correspondence):

Country: Postal Code: E-mail address: Telephone number: Fax:

1. Date of birth:

**9.** Fee Status Information:

Passport number: Issue date: Place of issue: Expiration date:

**8.** Country of birth: Nationality:

1. Disability/ Special needs (including dyslexia/ medical conditions):

## Title of proposed programme of study: 1.

**2.**

**3.**

**Type of programme** (HND / BSc etc):

1. Proposed entry date:

September

January Year

1. Year of entry:

Year 0

Year 1

Year 2

Year 3

Year 4

1. Mode of Study:

Full-Time

Part-Time

Distance Learning

Other



**If *Other* please specify**

1. University/ College/ Secondary Schools attended and qualifications obtained or taken. Continue on a separate sheet if necessary. **(Please attach an official transcript of your qualifications)**

|  |  |  |  |
| --- | --- | --- | --- |
| From (Month/ Year) | To (Month/ Year) | University/College attended | Qualifications/ Grades obtained if course completed (in case of degree or diploma give class and division). |
|  |  |  |  |

1. English Language:

Is English your first language?

Yes **(Go to question 18)**

## No (Go to question 17)

1. You have indicated that English is not your first language, therefore you must provide evidence that you have met the university’s English Language Entry Requirements or details of courses yet to be completed.

## Awarding organisation Award / Course title Results (including grade)

**Date of award or expected award:**

(Month/ Year):

Please attach copies of all certificates.

1. Present employment with brief description of duties (including name and address of present/ most recent employer). If you prefer you may also attach a Curriculum Vitae to this application.

From: To:

Job Title:

Brief details of main duties:

1. Previous employment (if any). (Continue on a separate sheet if necessary).

|  |  |  |
| --- | --- | --- |
| Dates | Name and address of employer | Position held |
|  |  |  |

1. **Referees:** Please indicate two people, one of whom should be able to comment on your ability to study at university. The other ideally should be a present/ most recent employer. Please pass the attached reference forms on to these referees.

|  |  |
| --- | --- |
| Name: Position: Address:  Tel:  E-mail: | Name: Position: Address:  Tel:  E-mail: |

1. Further information: Candidates are invited to include here relevant information for which no provision is made elsewhere on this form. Alternatively you may attach a Personal Statement to this application.
2. **Enclosures:** (please list)
3. **Finance:** How will your studies and maintenance be n8OaX§

Self/family

Government

Research Council

Employer

Other

If other, please specify:

***Contact details (if NOT*** *n****nanced by Self/ Family):***

Name: Company/ organisation:

Address:

Postal code:

Country:

E-mail address:

Telephone number:

Fax number:

**22.** Declaration.

I On± that, to the best of my knowledge, the information given in this form is true, complete and accurate and no information requested or other material information has been omitted. I give my consent to the processing of my data by University of Salford. I understand that any offer of a place on the above programme is subject to my acceptance of the University’s terms and conditions. I accept that if I do not fully comply with these requirements, the University of Salford reserves the right to cancel my application and I shall have no claim against the University of Salford in relation to this application.

I consent to the University of Salford recording and processing information about my race and ethnic origin, and my physical and mental health, for the purpose of statistical surveys only and within the provisions of the Data Protection Act 1998.

Signed: Date:

Send your completed application form to the Admissions OfnOa (address given on the front of this form). Please ensure that the forms you send out for references are also returned to this address.

RU1095 (Nov 2016))

# Referee’s Statement

## Please complete clearly. This form will be photocopied.

**Please return this form to:**

Admissions

6th Floor, Maxwell Building, University of Salford, Salford M5 4WT. UK

## For office use only Date received: Admissions Office: Admissions Tutor:

T +44 (0)161 295 4545

[admissions@salford.ac.uk](mailto:admissions@salford.ac.uk) [www.salford.ac.uk](http://www.salford.ac.uk/)



Please complete this section. Give this form and an envelope to the person who you have asked to act as your referee. When that person returns the sealed envelope to you, please post it to the above address.

Applicants

|  |  |
| --- | --- |
| Surname/Family name: | Other names: |

Proposed programme of study:

|  |  |
| --- | --- |
| Applicant’s signature: | Date: |

Please use the space **above** to comment on the candidate’s suitability to study for the programme indicated. Please be as frank as possible and use specific examples, where possible to illustrate your points.

If you prefer you may attach a separate reference on your official notepaper.

Referee

|  |  |
| --- | --- |
| Name of Referee: | Title: |
| Name and Address of Institution: | Please put official stamp of your institution here: |
| Referee’s Signature: | Date: |

RU1095b (Nov 2016)

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Referee

|  |  |
| --- | --- |
| Name of Referee: | Title: |
| Name and Address of Institution: | Please put official stamp of your institution here: |
| Referee’s Signature: | Date: |

RU1095b (Nov 2016)

## Equal Opportunity Monitoring

This form is only to assist us in monitoring Admissions and will not be taken into consideration for your application. In accordance with the Data Protection Act 1998, the University will seek your explicit permission should it intend to process any sensitive personal data for any reason other than Equal Opportunity purposes or exercising a legal right or obligation required by law. Sensitive data includes your racial or ethnic origin, sexual life, political beliefs, trade union membership, religious beliefs, physical or mental health and criminal offences.

**Gender:** Female Male

## Ethnic Origin:

*Please choose the option that you feel most closely describes your ethnic origin and enter the code in the box below:*

|  |  |  |  |
| --- | --- | --- | --- |
| ***White*** |  | ***Mixed*** |  |
| White UK | 11 | White and Black Caribbean | 41 |
| White Irish | 12 | White and Black African | 42 |
| White Scottish | 13 | White and Asian | 43 |
| Irish Traveller | 14 | Other Asian background | 39 |
| Other White background | 19 |  |  |
| ***Black or Black British*** |  | ***Chinese or other ethnic group***  Chinese | 34 |
| Caribbean | 21 | Any other | 39 |
| African | 22 |  |  |
| Other Black background | 29 | I do not wish to disclose this | 98 |
| ***Asian or Asian British*** |  | information |  |
| Indian | 31 |  |  |
| Pakistani | 32 |  |  |
| Bangladeshi | 33 |  |  |
| Other Asian background | 39 |  |  |

## Disability:

We advise you to declare your disability or dyslexia as early in the application process as possible. This enables us to assist you in organising your support as soon as practicable.

Do you consider yourself to have a disability? Yes No

If you have answered Yes, please give details below:

Do you have any condition that may require special studying arrangements to be made?

Yes No

If you have answered Yes, please give details below:

RU1095c (Nov2016)