Pre-Application/Enquiry Form for International Students



| passport-size photograph App | Application for admission in academic year | | |
|--|---|--|--|
| Please write your name | | | |
| on the back | Nationality | | |
| | Country of permanent residence | | |
| | Country of birth | | |
| | Name of parent or guardian | | |
| PLEASE USE UPPER AND LOWER CASE AS APPROPRIATE | Date of first entry to live in the UK (other than for education) | | |
| Family name (surname) | Day Month Year | | |
| Personal/given name(s) | First (native) language | | |
| Mr/Ms/Mrs/Miss | Date of birth Day Month Year | | |
| Correspondence address | PLEASE COMPLETE THE SECTION FOR UNDERGRADUATE DEGREE OR INDIVIDUAL PROGRAMME (BUT NOT BOTH) | | |
| | Undergraduate Degree | | |
| Area | BA/BSc/DipHE (delete as appropriate) | | |
| Postal code | Insert course title and subjects | | |
| Country | | | |
| Telephone number | | | |
| Fax number | - | | |
| Email | Year of entry (first or second) | | |
| | Individual Programme/Study Abroad | | |
| Home address (if different) | Insert one, two or three subjects (see Prospectus) | | |
| | 1. | | |
| Area | 2. | | |
| Postal code | 3. | | |
| Country | Semester 1 (September to January) | | |
| Telephone number | Semester 2 (February to June) | | |
| Fax number | Study Abroad with English | | |
| Email | April to January | | |
| | - - | | |
| Acknowledged | References requested | | |
| Date of interview | · | | |
| Date of Interview | Result | | |

| Name of High School(s) attende | ed | | From | То |
|---|-----------------------|------------------------|------------------------------|------------------------|
| | | | | |
| | | | | |
| d - ddr | | | | T- |
| ame and address of College/U | niversity attended | or attending at | the moment From | То |
| | | | | |
| | | | | |
| ualifications | | | | |
| Please enclose with this application Trade transcript(s) and of any cert | | | ligh School final report/tra | nscript and University |
| Certificates/degrees awarded | From | То | Level attained | Grade |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| lease list any examinations for | r which you are st | udying now | | |
| ubject | Examining bod | У | Level | Date |
| | | | | |
| | | | | |
| | | | | |
| xperience of learning English | (apart from High Sc. | hool classes) | | |
| /here? | | | From | То |
| | | | | |
| | | | | |
| | | | | |
| nglish language examinations | passed (state dates | and grades attain | ned) | |
| nglish language examination | | | | |
| ELTS | TOEF | Ĺ | TOEIC | |
| ambridge: FCE | | CAE | | CPE |
| THER (please specify) | | | | |
| | | | | |
| Financial Support | | | | |
| Who will pay for your tuition fees | and living costs? | | | |
| Are you applying for a grant or scl | nolarship? Yes | s No If | yes, from whom? | |
| If your application for a grant/sch | olarship is unsuccess | sful will you still co | ome to study in the UK? | Yes N |

Further information

| Please describe your special interests/hobbies and your reasons for wanting to study at Bath Spa University College. Give any other information about yourself which you think might be helpful or relevant to your application. If there are any special factors (eg, allergies or restrictions on diet) you must mention these also. (Use a separate piece of paper if necessary and please put your name at the top) | | | | |
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| Accommodation – please e | enter first, second and third choice |
|--------------------------|--------------------------------------|
|--------------------------|--------------------------------------|

| off campus accommodation (student to arrange her/himself – we provide help and advice) | | | | |
|--|--|--|--|--|
| on campus accommodation (limited) | homestay accommodation in a British family | | | |
| References | | | | |
| Please give the full name, position and address of two persons for you. (If possible, one of these people should be a native specific people should be a nat | | | | |
| 1) Name | Nationality | | | |
| Position | | | | |
| Address | | | | |
| Email | | | | |
| Telephone number | Fax number | | | |
| 2) Name | | | | |
| Position | Nationality | | | |
| Address | | | | |
| Addition | | | | |
| | | | | |
| Email | | | | |
| Telephone number | Fax number | | | |
| | | | | |
| How did you find the information about this institution? | | | | |
| Teacher (give institution) | | | | |
| Magazine (give title) | | | | |
| Agent (give name) | | | | |
| Exhibition (give name) | | | | |
| Internet (give web address) | | | | |
| British Council | | | | |
| Other (give details) | | | | |
| The particulars given on this form are, to the best of my knowledge, correct, and I undertake, if accepted, to comply with the rules of the University College. | | | | |
| Signature | Date | | | |
| | | | | |

This form should be completed and returned to: Arzoo Consultants Pvt. Ltd. # 312, 3rd Floor,

