

APPLICATION FORM FOR ADULT COURSES 2009/10



Both sides of this application should be completed and submitted with your payment to:
Admissions, SEEVIC College, Runnymede Chase, Benfleet, Essex SS7 1TW

PERSONAL DETAILS

TITLE: MR/MRS/MISS/MS/OTHER SURNAME

FIRST NAMES

ADDRESS

POSTCODE DATE OF BIRTH GENDER (please tick appropriate box)
 MALE FEMALE

DAYTIME TELEPHONE

EVENING TELEPHONE

MOBILE TELEPHONE

EMAIL ADDRESS

NATIONAL INSURANCE NUMBER

COURSE DETAILS

Please refer to the course fees and policy document

COURSE CODE	COURSE TITLE	FEE ENCLOSED*	FEE TYPE (please tick appropriate box)			
<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="checkbox"/> FULL FEE	<input type="checkbox"/> BENEFIT RATE	<input type="checkbox"/> INSTALMENT	<input type="checkbox"/> DEPOSIT (Skills for Life)
<input type="text"/>	<input type="text"/>	£ <input type="text"/>	<input type="checkbox"/> FULL FEE	<input type="checkbox"/> BENEFIT RATE	<input type="checkbox"/> INSTALMENT	<input type="checkbox"/> DEPOSIT (Skills for Life)

*Detailed information about payment by instalments is shown in the course fees and policy document. Please note that the refund policy is applicable to instalment payments.

ENTITLEMENT

If you are eligible for fee concession as detailed in the course fees and policy document, please tick the relevant concession you are claiming

JOBSEEKERS ALLOWANCE INCOME SUPPORT PENSION CREDITS
 COUNCIL TAX BENEFIT HOUSING BENEFIT WORKING TAX CREDIT
 UNWAGED DEPENDANT OF SOMEONE IN RECEIPT OF ONE OF THE ABOVE BENEFITS

Learners claiming fee remission in one of the above categories must submit a photocopy of the relevant Award Notice or giro dated within one month of the start of the course, with this application form.

AGE 16 - 18 (proof of age required)
 LEVEL 2 ENTITLEMENT
 LEVEL 3 ENTITLEMENT (proof of age required)

In addition to the evidence requested above, all claims to Level 2 or Level 3 entitlement must be accompanied by a completed declaration.

PAYMENT

Please indicate how you are making your payment for the course

CHEQUE* CREDIT/DEBIT CARD CASH (Personal enrolment only) INVOICE MY EMPLOYER/SPONSOR
 (Please enclose a letter from your employer/sponsor indicating that they will pay an invoice for the total fee)

*Please make cheques payable to SEEVIC College

CREDIT/DEBIT CARD NUMBER ISSUE NUMBER SECURITY CODE

CARDHOLDERS NAME AS IT APPEARS ON THE CARD DATE VALID FROM DATE VALID TO

CARDHOLDERS SIGNATURE

Please complete BOTH sides of this form >

ETHNICITY

Please indicate by placing a tick in the box next to the description which you feel most closely describes your ethnicity

NATIONALITY

FIRST LANGUAGE IF OTHER THAN ENGLISH

- | | |
|---|--|
| <input type="checkbox"/> 11 ASIAN OR ASIAN BRITISH - BANGLADESHI | <input type="checkbox"/> 19 MIXED - WHITE AND ASIAN |
| <input type="checkbox"/> 12 ASIAN OR ASIAN - INDIAN | <input type="checkbox"/> 20 MIXED - WHITE AND BLACK AFRICAN |
| <input type="checkbox"/> 13 ASIAN OR ASIAN BRITISH - PAKISTANI | <input type="checkbox"/> 21 MIXED - WHITE AND BLACK CARIBBEAN |
| <input type="checkbox"/> 14 ASIAN OR ASIAN BRITISH - ANY OTHER ASIAN BACKGROUND | <input type="checkbox"/> 22 MIXED - ANY OTHER MIXED BACKGROUND |
| <input type="checkbox"/> 15 BLACK OR BLACK BRITISH - AFRICAN | <input type="checkbox"/> 23 WHITE - BRITISH |
| <input type="checkbox"/> 16 BLACK OR BLACK BRITISH - CARIBBEAN | <input type="checkbox"/> 24 WHITE - IRISH |
| <input type="checkbox"/> 17 BLACK OR BLACK BRITISH - ANY OTHER BLACK BACKGROUND | <input type="checkbox"/> 25 WHITE - ANY OTHER WHITE BACKGROUND |
| <input type="checkbox"/> 18 CHINESE | <input type="checkbox"/> 98 ANY OTHER |

ELIGIBILITY

Please answer yes or no to the following question

Have you been legally resident in the UK/European Union for the last 3 years?

YES NO

If you have answered yes to the above question, please include a photocopy of the last page of your passport (which includes your passport number and photograph) with this application. If you have answered no, then you will need to include documentation to support your eligibility for funding for your learning programme.

DISABILITY

Please answer yes or no to the following question

Do you have a disability which may require special facilities, a medical condition we need to be aware of, or any learning difficulties?

YES NO

If yes, please give brief details below

PREVIOUS QUALIFICATIONS

Please tick the appropriate box below to indicate the highest level of qualification that you have previously attained

- NO PREVIOUS QUALIFICATION
- BELOW ENTRY LEVEL
- ENTRY LEVEL
- LEVEL 1 - GCSE/O Levels Grades D-G, 1 AS Level, CSE below grade 1, NVQ Level 1, BTEC1st
- LEVEL 2 - 5+ GCSE/O Level Grades A-C or CSE Grade 1, 1 Advanced Level, 2/3 AS Levels, NVQ Level 2, BTEC 1st Diploma, GNVQ Intermediate
- LEVEL 3 - 2 or more A Level passes, 4 or more AS Level passes, BTEC National OND/ONC, GNVQ Advanced, NVQ Level 3, ESOL & Foreign Language advanced awards
- LEVEL 4 - BTEC National HNC/HND, First Degree, Higher Education Certificate or Diploma, NVQ Level 4, Teaching Qualifications (including PGCE)
- LEVEL 5 - Higher degree, NVQ Level 5, Other high level professional qualifications
- QUALIFICATIONS NOT KNOWN
- OTHER Please give details:

ABOUT US

Please tick the appropriate box below to indicate how you found out about this course

Where did you hear about this course?

- Supermarket display Received adult guide in the post Newspaper Website Family/Friends Careers service Radio
- Other Please give details:

PERSONAL INFORMATION SUPPLIED ON THIS FORM WILL BE HELD ON COMPUTER RECORDS AND MAY BE USED FOR ANALYSIS OF PERFORMANCE

STUDENT DECLARATION

Please ensure all sections of this form are completed and the student declaration below is signed

I certify that the information I have given on this form is correct and I give my consent to the processing and sharing of this information for all purposes relating to my application.

STUDENT SIGNATURE

DATE

Please complete BOTH sides of this form >

FOR OFFICE USE ONLY

<input type="checkbox"/> Student eligibility for funding checked	Signed Registry:	A57 Tuition Fees <input type="checkbox"/> Direct from Employer <input type="checkbox"/> From learner and learner to recover them from employer <input type="checkbox"/> No tuition fees received <input type="checkbox"/> Not known
Fee Type <input type="checkbox"/> Full <input type="checkbox"/> Benefit	Signed as Input MIS:	
Concession Evidence <input type="checkbox"/> Benefit Type Valid date <input type="checkbox"/> Yes <input type="checkbox"/> L2E <input type="checkbox"/> L3E Entitlement form completed <input type="checkbox"/> No <input type="checkbox"/> Yes	Finance Receipt No:	