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| Logo Mary Hare Courses New Aug 2013Application form – Notes for guidance | | | | |
| **General**  Before completing the form, please read these notes carefully. You should also read the current University prospectus and course booklet(s) relating to the course(s) for which you are applying in order to ensure that you are familiar with the curriculum and entry requirements.  Your application form may be photocopied; therefore, it is important that you write neatly using black ink or typescript.  Many courses have a deadline by which applications should be received. Please consult course literature or the department concerned.  **Mature Applicants**  The University of Hertfordshire (UH) welcomes mature students, including those who do not have conventional qualifications, for admission to higher education.  Full account is taken of relevant experience and other educational achievements.  **The Data Protection Act 1998**  UH maintains records relating to its students in both manual and computerised forms. These include correspondence with and relating to students, both current and potential; computerised records for applicants created from information supplied by applicants and/or UCAS and other agencies; and information on current students collected at initial registration or added as a result of subsequent processing.  The information collected and held is necessary for the administration of UH’s courses and examinations and the quality assurance processes that support them and permits the University to make statistical returns required by the Government, the Higher Education Funding Council for England, and other statutory agencies. In completing the declaration on the Registration Form students are deemed to consent to the collection, recording and use of this information in the ways described above, and set out in more detail within the University’s Data Protection Act registration.  **Referees**  Send part B, “The Reference”, to your referee(s), having completed the personal details on the first side. It is your responsibility to ensure that UH receives your reference.  **Section 3 Finance and Fee status**  If you live in the UK, state your area of permanent residence. This might be district (Sefton), borough, (Enfield), metropolitan area (Gt Manchester), or county (Hertfordshire). If you live outside the UK state the country (Italy, France etc.) where you are living as your area of permanent residence.  Please give details of who you expect to pay your fees for the proposed course. If not known, please indicate this.  **Section 7 Academic Qualifications achieved.**  Applicants with overseas qualifications should give details of the examinations taken as preparation for entry to higher education. Examples are Higher School Certificates, Apolytirion, Baccalaureate, Diploma di Maturita, Examen Artium and Studentereksamen. Applicants with qualifications obtained in a language other than English should attach a certified English transcript to the form. Applicants holding a BTEC (SCOTVEC) award, such as an ND or GNVQ (GSVQ) or NVQ (SVQ), should attach a certificate of achievement/unit  credit giving details of the award title, level if applicable, and  all units, modules, and components. | | **Section 8 Academic Qualifications pending**  If you are working towards an award, NVQ (SVQ) or GNVQ (GSVQ) lease give full details of course title, level, units, modules, and components on a separate sheet.  **Section 11 Further Information**  Enter any information to support your application.  Admissions Tutors will be interested in your reasons for choosing the course(s), your career aspirations, relevant experience, and information concerning your intellectual, social, sporting or other interests. You should give details of any non-examined subjects you are studying. If you have been out of education, please outline any relevant experience that may be considered in lieu of formal qualifications, either at home or in voluntary or paid work. You should explain any gaps or breaks in your career. If you are applying for deferred entry (a year beyond the next academic year) please explain your reasons.  **Section 12 References**  Please consult course literature to see if any particular type or number of referees is required. (You should send Part B to your first named referee.) Some departments may contact referees directly after receipt of your form. Normally, your referee would be one of the following: The Head of your present or last school; Principal of your College of Further Education; Course Tutor of your present or last course of studies. If you have been out of education for some time, you may wish to consider one of the following: your current or last employer, or training officer, or careers advisor; if you belong to a relevant organisation, voluntary or not an officer of that organisation, Access Course Tutor. If you have any difficulty in identifying a suitable referee you should seek the advice of the Mary Hare Admissions Service.  **Section 13 Disabilities/Special Needs**  (Physical or other disability or medical condition including any which might necessitate special arrangements or facilities) Information on disability will be shared with the disabled student co-ordinator. Unless special needs are made known, the University will be unable to make appropriate provision for you.  **Important Note**  The University of Hertfordshire (UH) and Mary Hare (MH) undertakes to take all reasonable steps to provide educational services in the manner set out in the prospectus and in other documents. Should industrial action or other circumstances beyond the control of UH interfere with its ability to provide such services, UH undertakes to use all reasonable steps to minimize the resultant disruption to educational services. UH does not undertake any absolute obligation whatsoever to provide educational services in the manner specified in the prospectus or in any other document, nor does it undertake any other obligation in respect of the provision of educational services which is more onerous than the obligations set out herein. Should you become a student of UH/MH, this notice shall be a term of any contract between you and UH and Mary Hare. Any offer of a place made to you by UH/MH is made on the basis that in accepting such an offer you signify your consent to the incorporation of this notice as a term of any such contract and that you agree to abide by the rules and regulations of the University of Hertfordshire/Mary Hare. | | |
| Application Form | | | | Logo Mary Hare Courses New Aug 2013 |
| **Please Note:** | | **Please return your application form to the Courses Department**  **Mary Hare School, Arlington Manor, Snelsmore Common, Newbury, Berks RG14 3BQ** | | |

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| 1. **Personal Details** *(please print clearly in black ink and Block capitals)* | | | | | | | | | | | | | | | | |
| Family Name *as appears in passport* |  | | | | | | | | | | | | | | | |
| First Name(s) *as* appears *in passport* |  | | | | | | | | | | | | | | | |
| Title: (Mr, Mrs, Miss, Mx, Dr, Other) |  | Previous family name: | | | | | |  | | | | | | | | |
| Country of Birth: |  | Date of Birth (DD/MM/YYYY) | | | | | |  |  | |  | | |  |  |  |
| Country of domicile: |  |  | |  |  | |  |  | |  | | |  | | |  |
| Nationality: |  | Male |  | | Female |  | | Other | |  | | Prefer not to say | | | |  |
| Home Address: | | Correspondence Address *(if Different)* | | | | | | | | | | | | | | |
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| Post Code: |  | Post Code: | | | | | |  | | | | | | | | |
| Telephone Number: |  | Telephone: | | | | | |  | | | | | | | | |
| Mobile Number: |  | Mobile Number: | | | | | |  | | | | | | | | |
| Email Address: |  | Email Address: | | | | | |  | | | | | | | | |
| QTS Number: (applicable for ToD course) |  | Do you have BSL, if so what level? | | | | | |  | | | | | | | | |

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| 1. **Please tick which Course you are applying for**: | | | | | | | | | |
| MA Deaf Education Studies (Teacher of the Deaf): | | |  | PG Diploma Deaf Education Studies (Teacher of the Deaf): | | | | |  |
| MSC Deaf Education Studies (Educational Audiology): | | |  | PG Diploma Deaf Education Studies (Educational Audiology): | | | | |  |
|  | | |  | Stand Alone Module Only (Educational Audiology) | | | | |  |
| Level of Study: | Masters | |  |  | | Postgraduate |  | |  |
| Date of Entry | Month |  | | Year: |  | | |  | |
| Mode of Study: | | Part-time | | Associate University: | | | University of Hertfordshire | | |

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| 1. **Finance and Fee Status** | | | | |
| All students offered registration will be asked to supply details of their financial position, letters of guarantee from employer/sponsors etc., to ensure that they can complete the course without financial hardship | | | | |
| Who will be paying your fees? | Self: |  | Please give address for Invoicing: |  |
| Employer: | |  | Please give name & address of person to be Invoiced: |  |
| \*Scholarship: | |  | Please give name & address of person to be invoiced: |  |
| Other: | |  | Please give name & address of sponsor: |  |
| *Please Note: \*For Scholarship purposes Mary Hare School is the provider, please ensure Mary Hare is the name that is entered*  *on the Scholarship funding application form.*  *All successful applicants will be required to complete the Funding Information section when registering online* | | | | |

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| 1. **Employer Agreed Support** | | | | |
| As part of the Entry requirements, a Support Agreement will be required to be completed and signed by the Students Employer/Line Manager.  Please provide the name and address of the person who will be able to approve and sign the Support Agreement below: | | | | |
| Name: |  | | | |
| Address: |  | | | |
| Employer email address |  | | |  |
| Name of Mentor (if known) | |  |  | |  |
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| 1. **Declaration of a criminal conviction** | | | | | | | |
| *Please Note: A Disclosure and Barring Service (DBS) will be required prior to commencing the course* | | | | | | | |
| To help the University reduce the risk of harm or injury to their students caused by the criminal behaviour of other students, they must know about any relevant criminal convictions that an applicant has.  Relevant criminal convictions are only those convictions for offences against the person, whether of a violent or a sexual nature, and convictions for offences involving unlawfully supplying controlled drugs or substances where the conviction concerns commercial drug dealing or trafficking. Convictions that are spent (as defined by the Rehabilitation of Offenders Act 1974) are not considered to be relevant and you should not reveal them (but see next paragraph).  **If you are applying for courses in teaching, health, social work and courses involving work with children, vulnerable adults, you must tell us about any criminal convictions. Including spent sentences and cautions (including verbal cautions) and bind-over orders. If you are offered a place on one of these courses, and before you commence your studies, you will need an ‘Enhanced Disclosure Document’ from the Criminal Records Bureau. The University will provide you with the information on how to do this.** | | | | | | | |
| ***Courses in teaching, health, social work, and courses***  ***involving work with children or vulnerable adults.***  *For these courses, you must answer ‘Yes’ if any of the*  *following statements apply to you.*  *a) I have a criminal conviction.*  *b) I have a spent criminal conviction.*  *c) I have a caution (including a verbal caution).*  *d) I have a bind-over order.*  *e) I am serving a prison sentence for a criminal conviction.*  *If statement e) applies to you, you must also give the prison*  *address as your postal address on page 1 of your application*  *and a senior prison officer must support your application.* | | | | | | ***All other courses***  *For those courses, you must answer ’Yes’ if any of the following statements apply to you.*  *a) I have a relevant criminal conviction that is not spent.*  *b) I am serving a prison sentence for a relevant criminal conviction.*  *If statement b) applies to you, you must also give the prison address as your postal address on page 1 of your application and a senior prison officer must support your application. Convictions that are spent (as defined by the Rehabilitation of Offenders Act 1974) are not considered to be relevant and you should not reveal them.* | |
| Please indicate if you have any criminal convictions, including spent, cautions (including verbal), bind over order. | | | | | | | |
| Yes |  |  | No |  |  |  |  |
| Applicants who answer ‘Yes’ will not be automatically excluded from the application process, and their application will be considered on its merits before the relevance of their criminal conviction is taken into account. However, the University may ask for more information about their criminal conviction before making a final decision.  If you are convicted of a relevant criminal offence after you have applied, you must tell us. Do not send details of the offence; simply tell us that you have a relevant criminal conviction. The University may then ask you for more details. | | | | | | | |  |

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| 1. **Have you ever studied previously in the UK?** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tick/cross one box: | Yes |  | | No | | |  | | Student ID Number: | | | | |  |  | |  | | |  | |  | |  | |  | |  | |
| School/College/University: | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Attended from (DD/MM/YYYY) | |  |  | |  |  | |  | |  |  |  | to | | |  | |  |  | |  | |  | |  | |  | |  |
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| 1. **Previous and Present Education** | | | |
| Please list details of all institutions since age 11. Please continue onto an extra sheet if necessary. | To  MM/YY | From  MM/YY | Study Mode  PT/FT/SW/DL |
| Name and address of institution |
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| 1. **Academic Qualifications – Exams Achieved** | | | | |
| Please list all qualifications taken and results, include any qualifications that are pending | | | | |
| Exam Date | Awarding Body | Subject | Qualification | Results Achieved |
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| 1. **Academic Qualifications – Exams Pending** | | | |
| Please list all qualifications taken and results, include any qualifications that are pending | | | |
| Exam Date | Awarding Body | Subject | Qualification |
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| 1. **Work Experience/Employment History. Please continue onto an extra sheet if necessary** | | | | | |
| Please give details of work experience, training, and employment, include voluntary and unpaid employment. | | | | | |
| Dates from | Dates to | FT/PT | Post Held | Organisation name and address | Brief description of duties |
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| 1. **Further Information / Personal Statement** |
| Please state here your reasons for wishing to pursue the course, give details of any relevant skills. Indicate any other achievements or experience that will support your application. |
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| 1. **References** | | | |
|  | **Referee 1** |  | **Referee 2** |
| Name: |  | Name: |  |
| Address: |  | Address: |  |
|  |  |  |  |
|  |  |  |  |
| Post Code: |  | Post Code: |  |
| Contact Number: |  | Contact Number: |  |
| Email Address: |  | Email Address: |  |
| Capacity in which applicant is known to referee. | | Capacity in which applicant is known to referee. | |
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| For how long |  | For how long |  |
| Please note: The attached ‘statement by referee’ is be given the referees by the applicant.  References should not be provided by close family members or friends. | | | |

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| 1. **Disabilities or Special Needs** | | | | | | | | |
| Please tick the appropriate box(es) and in the bottom of this section indicate any additional support or facilities that you may need at Mary Hare. This information will initially be passed to the course leader who will support applicant through the admissions process. | | | | | | | | |
| No known disability |  |  | Specific Learning Difficulty (e.g., Dyslexia) | | | |  |  |
| Blind/partially sighted |  |  | Deaf/partial hearing | | | |  |  |
| Wheelchair user/mobility difficulties |  |  | Autistic Spectrum disorder or Asperger Syndrome | | | |  |  |
| Mental health difficulties |  |  | Unseen disability e.g., diabetes, epilepsy, asthma, or a heart condition. | | | |  |  |
| Two or more of the above disabilities / special needs |  |  | A disability not listed | | | |  |  |
| I am in receipt of the Disability Students Allowance | | | | Yes |  | No |  |  |
| I am applying for or intend to apply for the Disability Students Allowance | | | | Yes |  | No |  |  |
| Please detail below any additional support, adjustments or changes you may need for your studies. | | | | | | | | |
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| **14. Dietary requirements** | | | | | | | |  |
| **Please tick appropriate box(s)** | | | | | | | |  |
| Vegetarian |  | Dairy Intolerant | |  | Lactose Intolerant |  |  |  |
| Vegan |  | Wheat Intolerant | |  | Gluten Intolerant |  |  |  |
| Nut Allergy |  | Other: |  | | | | |  |

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| **15. How did you hear about us?** | | | |
| Word of mouth: |  | *Please give details* |  |
| Email list: |  | *Please give details* |  |
| Website: |  | *Please give details* |  |
| Conference exhibit: |  | *Please give details* |  |
| Direct Mail: |  | *Please give details* |  |
| Internet Search: |  | *Please give details* |  |
| Other |  | *Please give details* |  |

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| **16. Emergency Contact** | | | |
| Student Name: |  | | |
| Emergency Contact Name: |  | Relationship to You: |  |
| Additional Comments: |  | | |
|  |  | | |
| ' Contact Number: |  | | |

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| **17. Declaration** | | | |
| I confirm that the information on this application form is complete, and that no information requested, or other material has been omitted.  I give my consent to the processing of my data by Mary Hare for course admission purposes. | | | |
| Signature: |  | Date: |  |
| Name: |  |  | |

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| Equal opportunities monitoring form | | | | | | | |
| In completing this form, you are helping the University to monitor the fairness of its admissions processes and to ensure equal treatment for all applicants. This form will be separated from your application and will not be available to the Admissions Tutor. The information supplied will be recorded on our computer system during the application process and the form will be destroyed as confidential waste. Please tick the box/boxes that best describe you. | | | | | | | |
| I am |  | Male |  | Female | |  |  |
|  |  | Other |  | Prefer not to say | |  |  |
|  | | | | | | | |
| My age today is |  | 18-21 |  | 22-24 |  | | 25-29 |
|  |  | 30-39 |  | 40 or over |  | | Prefer not to say |

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| **A White** | |  | **D Mixed** | | |  |  |
| British |  |  | White and Black Caribbean | | |  |  |
| Irish |  |  | White and Black African | | |  |  |
| Any other White background, please detail |  |  | White and Asian | | |  |  |
|  | |  | Any other Mixed background, please detail | | |  |  |
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| **B Black or Black British** | |  | **E Chinese or other ethnic group** | | |  |  |
| Caribbean |  |  | Chinese | | |  |  |
| African |  |  | Any other Chinese background, please give details below | | | |  |
| Any other Black background, please detail |  |  |  | | | |  |
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| **C Asian or Asian British** | |  | **F Other** |  |  |  |  |
| Indian |  |  |  | | |  |  |
| Pakistani |  |  | **G Prefer not to say** |  |  |  |  |
| Bangladeshi |  |  |  | | |  |  |
| Any other Asian background, please detail |  |  |  | | |  |  |
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| Statement by Referee 1 | | | |
| *To be completed by applicant* | | | |
| Applicants full Name |  | | |
| Course Name |  | | |
| Name and address to which reference is to be sent | | | |
| Name: |  | | |
| Address: | Mary Hare School, Arlington Manor | | |
|  | Snelsmore Common, Newbury | | |
| County: | Berkshire | Post code: | RG14 3BQ |
| Email Address: | courses@maryhare.org.uk | | |
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| Notes for the guidance of referees | | | |
| The referee’s report is an integral and important part of the selection process, and the information you give will help to guide admissions tutors in making their decisions.  When you write personal comments about the applicant, please remember that under the Data Protection Act, the applicant can ask for a copy of the reference and any other personal information that we have about them.  In order that the Mary Hare can evaluate an applicant’s academic and intellectual capacity, your reference should possibly cover:   1. Suitability for the course applied for. 2. Intellectual qualities including: 3. Development to date and previous examination performance with special reference to any factors which may in your option have adversely influenced the result 4. Present performance 5. Potential, including as assessment of the probable results of any pending examinations. 6. Personal qualities. 7. Career aspiration. 8. Heath and other personal circumstances relevant to the application. 9. Athletic, social, and other interests. | | **Mature applicants**  Referees may have difficulty in commenting on the academic abilities of mature applicants who may not have any recent educational experience, and in these circumstances, referees may wish to confine their comments to matters listed under 1, 2c, 3, 4, 5 and 6 opposite  **References can be return to the course administrator either by post or via email, as per details above.** | |

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| To be completed by the referee | | | | | |
| *This form may be photocopied: please type if possible or write in black ink. Please affix official stamp, where appropriate, at the end of this statement. Please return this completed form to Sarah McDevitt, Course Administrator, Mary Hare School, Arlington Manor, Snelsmore Common, Newbury, RG14 3BQ or email to:* [s.mcdevitt@maryhare.org.uk](mailto:s.mcdevitt@maryhare.org.uk) | | | | | |
| Referee’s full Name | |  | | | |
| Post/Occupation/Relationship | |  | | | |
| How long have you known applicant | | |  | | |
| Name of School/College/Organisation | | |  | | |
| Name and address of referee: | | | | | |
| Address: |  | | | | |
|  |  | | | | |
| County: |  | | | Post code: |  |
| Telephone No: |  | | |  |  |
| Email Address: |  | | | | |

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| Name of applicant *(block capitals or type)* | | |  | | | | |
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| Signature: |  | | | | Date: |  | |
| Statement by Referee 2 | | | | | | | |
| *To be completed by applicant* | | | | | | | |
| Applicants full Name | |  | | | | | |
| Course Name | |  | | | | | |
| Name and address to which reference is to be sent | | | | | | | |
| Name: | | Sarah McDevitt | | | | | |
| Address: | | Mary Hare School, Arlington Manor | | | | | |
|  | | Snelsmore Common, Newbury | | | | | |
| County: | | Berkshire | | Post code: | | | RG14 3BQ |
| Email Address: | | courses@maryhare.org.uk | | | | | |
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| Notes for the guidance of referees | | | | | | | |
| The referee’s report is an integral and important part of the selection process, and the information you give will help to guide admissions tutors in making their decisions.  When you write personal comments about the applicant, please remember that under the Data Protection Act, the applicant can ask for a copy of the reference and any other personal information that we have about them.  In order that the Mary Hare can evaluate an applicant’s academic and intellectual capacity, your reference should possibly cover:   1. Suitability for the course applied for. 2. Intellectual qualities including: 3. Development to date and previous examination performance with special reference to any factors which may in your option have adversely influenced the result 4. Present performance 5. Potential, including as assessment of the probable results of any pending examinations. 6. Personal qualities. 7. Career aspiration. 8. Heath and other personal circumstances relevant to the application. 9. Athletic, social, and other interests. | | | | **Mature applicants**  Referees may have difficulty in commenting on the academic abilities of mature applicants who may not have any recent educational experience, and in these circumstances, referees may wish to confine their comments to matters listed under 1, 2c, 3, 4, 5 and 6 opposite  **References can be return to the course administrator either by post or via email, as per details above.** | | | |

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| To be completed by the referee | | | | | |
| *This form may be photocopied: please type if possible or write in black ink. Please affix official stamp, where appropriate, at the end of this statement. Please return this completed form to Sarah McDevitt, Course Administrator, Mary Hare School, Arlington Manor, Snelsmore Common, Newbury, RG14 3BQ or email to:* [s.mcdevitt@maryhare.org.uk](mailto:s.mcdevitt@maryhare.org.uk) | | | | | |
| Referee’s full Name | |  | | | |
| Post/Occupation/Relationship | |  | | | |
| How long have you known applicant | | |  | | |
| Name of School/College/Organisation | | |  | | |
| Name and address of referee: | | | | | |
| Address: |  | | | | |
|  |  | | | | |
| County: |  | | | Post code: |  |
| Telephone No: |  | | |  |  |
| Email Address: |  | | | | |

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| Name of applicant *(block capitals or type)* | |  | | |
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| Signature: |  | | Date: |  |

|  |  |
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| **Further Information / Additional Page** | |
| Please state section: |  |
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