

Application Form 2020

APPLICATION FORM

Woking College, Rydens Way, Woking, Surrey GU22 9DL Tel: 01483 761036
Fax: 01483 728144 Email: admissions@woking.ac.uk Web: www.woking.ac.uk

Surname: Forenames:

Address:

Postcode: Home Tel

No:

Mobile: Email:

Date of Birth

Sex (Please Tick)

Age on 31/8/2020

Country of residence
since September 2017

M F

Present School

Name of

School:

Name of Head

Teacher:

Address:

Parent/Guardians (Please indicate to whom correspondence should be addressed)

Name and title of Primary

Contact:

Daytime Tel

No:

Email:

Name and title of Secondary

Contact:

Daytime Tel

No:

Email:

Subjects to be studied at

College:

GCSE, GNVQ, Other

Subject	Result (if taken)	Subject	Result (if taken)

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<p>FOR OFFICE USE ONLY</p> <p>Offer of Place:</p> <p>Admission No:</p> <p>Reference Required:</p> <p>Interview:</p> <p>Date Rec:</p>	<p>Please write about yourself, for example your interests, achievements, hobbies or positions of responsibility. Please also include any career intentions.</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
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How did you hear about Woking College?

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Which other Schools/Colleges are you applying to?

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Do you wish to make us aware of any health/personal/learning support issues? (Please give details)

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I understand that any information I give may be passed onto members of staff for the purpose of supporting me on my programme of study. I hereby give my consent.

Signature of Applicant

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How We Use Your Personal Information

The personal information you provide is passed to the Chief Executive of Skills Funding (“the Agency”) and, when needed, the Department of Education, including the Education Funding Agency to meet legal responsibilities under the Apprenticeships, Skills, Children and Learning Act 2009, and for the Agency’s Learning Records Service (LRS) to create and maintain a unique learner number (ULN). The information you provide may be shared with other partner organisations for purposes relating to education or training. Further information about use of and access to your personal data, and details of partner organisations are available at:-

<http://skillsfundingagency.bis.gov.uk/privacy.htm>
<http://www.learningrecordservice.org.uk/documentlibrary/documents/Code-of-Practice-for-Sharing-of-Personal-Information.htm>

Please help us to monitor our Equality and Diversity by ticking the appropriate box. This will be treated as confidential.

<input type="checkbox"/> 31 White – English / Welsh / Scottish / Northern Irish / British	<input type="checkbox"/> 41 Asian or Asian British – Bangladeshi
<input type="checkbox"/> 32 White – Irish	<input type="checkbox"/> 42 Asian or Asian British – Chinese
<input type="checkbox"/> 33 White – Gypsy or Irish Traveller	<input type="checkbox"/> 43 Asian or Asian British – Any other Asian Background

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- | | |
|--|---|
| <input type="checkbox"/> 34 White – Any other White Background | <input type="checkbox"/> 44 Black or Black British – African |
| <input type="checkbox"/> 35 Mixed – White and Black Caribbean | <input type="checkbox"/> 45 Black or Black British – Caribbean |
| <input type="checkbox"/> 36 Mixed – White and Black African | <input type="checkbox"/> 46 Black or Black British – Any other Black / African / Caribbean Background |
| <input type="checkbox"/> 37 Mixed – White and Asian | <input type="checkbox"/> 47 Other – Arab |
| <input type="checkbox"/> 38 Mixed – Any Other Mixed / Multiple Ethnic Background | <input type="checkbox"/> 98 Other – Any Other Ethnic Group |
| <input type="checkbox"/> 39 Asian or Asian British – Indian | <input type="checkbox"/> 99 Other – Not provided |
| <input type="checkbox"/> 40 Asian or Asian British – Pakistani | |

Signature of Applicant

Date

Signature of Parent/Guardian

Date
