University of Chichester

UK Application form for MA(ED)

PERSONAL DETAILS

Title (Mr/Miss/Mrs/Ms):	Gender: Male ❑ Female ❑	Forenames:
Surname (Family Name):		Previous Surnames (if applicable):
Date of Birth:		Country of Birth:
Nationality:	Have you been ordinarily resident in the UK for the last three years: Yes ❑ No ❑	
Permanent/Home Address: Post Code:		
Mobile:	Home Phone:	Home Email:

CURRENT EMPLOYMENT DETAILS

Name of Workplace:	
Address of Workplace: Post Code:	
Work Phone:	Work Email:

MODULE DETAILS

Module title applied for:	Start Date:

If you wish to be considered for Recognition of Prior Learning (RPL) including PGCE at Masters level, please provide a transcript detailing the level at which previous work was undertaken and how many credits were awarded. Your application cannot be processed without this information.

❑ Yes, I would like to apply for RPL
(please tick box and enclose evidence)

ACADEMIC RECORD (Qualifications achieved from age 18)

Name of School/College/University	Date from	Date to	Qualifications achieved	Subjects	Grade/Results

EMPLOYMENT RECORD (Current first)

Date from	Date to	Employer (Workplace, not your Local Education Authority)	Position held

FEES

Who will be paying your fees: Self ❑ Sponsor ❑
Please complete and attach Sponsorship Agreement form. See 'third party payments' on www.chi.ac.uk/studentfinance/TuitionFees.cfm

DISABILITY OR SPECIAL NEED

Do you have a disability or any special need for which you may require support or extra resources: Yes ❑ No ❑
If yes, please provide full details in an accompanying letter.

CRIMINAL CONVICTIONS

Have you been convicted of a criminal offence, either in the UK or in any other country: Yes ❑ No ❑
If yes, please provide full details in an accompanying letter. N.B. There is no need to declare minor motoring offences

DECLARATION

I certify that the foregoing information is correct and I understand that any false or misleading statement made on this form, or failure to disclose information relevant to this application may result in my application being rejected/registration being terminated and/or may lead to legal proceedings. I agree to supply any information that I am asked for in relation to this application. I understand that this information will be treated in confidence. I understand that the University of Chichester's administration of applications is registered under the Data Protection Act and that personal information which I have declared will be stored on computer and may be verified against other information which I have passed on to other public bodies.

Signed:	Dated:

ENDORSEMENT

The following to be completed by an appropriate senior colleague of the applicant (eg Head, Deputy Head, Head of Department or Professional Tutor)

1. I support the applicant, who is employed in the workplace given below, in their pursuit of this professional development course: ❑
2. I have seen original evidence of their ID i.e. passport or photo driving licence: ❑
3. I have seen original certificates for the qualifications as listed on the application form: ❑

Name of endorser (Please print):

Name and Address of Workplace:

Post Code:

Position held:	Signed: