

## Home and EU Application Form

Please type or print in black ink and complete in BLOCK CAPITALS if hand-written

<b>Personal information (for name, please state this as it appears on your passport)</b>	
Title (e.g. Mr/Miss/Mrs):	Forename(s):
Surname:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Date of birth:	Home telephone:
Mobile telephone:	E-mail address:
Correspondence address:	
Country:	Post code:
Permanent home address (if different):	
Country:	Post code:
<b>Please ensure you submit a copy of the personal details page in your passport with this application form</b>	

<b>Course(s) applied for</b>		
Year of study	20__	
<b>Course(s):</b>	<b>Campus</b>	<b>Intake</b>
<input type="checkbox"/> <b>BSc Accounting and Management</b>	<input type="checkbox"/> London	<input type="checkbox"/> Sept
<input type="checkbox"/> <b>BSc Computing Systems</b> <input type="checkbox"/> <b>With Diploma in Professional Practice</b>	<input type="checkbox"/> London	<input type="checkbox"/> Jan <input type="checkbox"/> Sept
<input type="checkbox"/> <b>Graduate Certificate</b>	<input type="checkbox"/> London <input type="checkbox"/> Birmingham	<input type="checkbox"/> Jan <input type="checkbox"/> May <input type="checkbox"/> Sept
<input type="checkbox"/> <b>MSc Marketing</b> <input type="checkbox"/> <b>With Advanced Practice</b>	<input type="checkbox"/> London <input type="checkbox"/> Birmingham	<input type="checkbox"/> Jan* <input type="checkbox"/> Sept
<input type="checkbox"/> <b>Extended MSc Marketing</b> <input type="checkbox"/> <b>With Advanced Practice</b>	<input type="checkbox"/> London <input type="checkbox"/> Birmingham	<input type="checkbox"/> May <input type="checkbox"/> Sept*
<input type="checkbox"/> <b>MSc International Business</b> <input type="checkbox"/> <b>With Advanced Practice</b>	<input type="checkbox"/> London <input type="checkbox"/> Birmingham	<input type="checkbox"/> Jan <input type="checkbox"/> May <input type="checkbox"/> Sept
<input type="checkbox"/> <b>Extended MSc International Business</b> <input type="checkbox"/> <b>With Advanced Practice</b>	<input type="checkbox"/> London <input type="checkbox"/> Birmingham	<input type="checkbox"/> Jan <input type="checkbox"/> May <input type="checkbox"/> Sept
<input type="checkbox"/> <b>MSc Professional Software Development</b>	<input type="checkbox"/> London	<input type="checkbox"/> Jan <input type="checkbox"/> May <input type="checkbox"/> Sept
<input type="checkbox"/> <b>MBA</b> <input type="checkbox"/> <b>With Advanced Practice</b>	<input type="checkbox"/> London	<input type="checkbox"/> Sept

Mode of study (postgraduate study only):	<input type="checkbox"/> Weekdays	<input type="checkbox"/> Evenings and weekends
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\* Only available in London

### UK Residency status

Have you been a resident in the UK/EU (i.e. without any restriction on the period you may remain in the UK/EU) for the past three years?  Yes  No

If yes, can you provide evidence to prove that you have been in the UK for this period?  Yes  No

Are you eligible for Student Finance for the duration of your course?  Yes  No

### Education history

**Please submit a copy of all previous qualifications (including transcripts and final certificates) obtained previously that you would like to be considered when we assess you for entry onto your chosen course. If available, this must include your highest level of study being used for entry onto your chosen course.**

Are you currently studying for a qualification?  Yes  No

**If yes, please give further details in the boxes below**

Qualification and subject

Name of institution/awarding body

Date of expected completion/award

### Application history

Have you previously applied for a course with Ulster University?  Yes  No

Have you previously withdrawn from a course with Ulster University?  Yes  No

### Referees

**Please provide the names and details of two persons who may be contacted regarding your academic work and/or employment.**

Name 1:

Position:

Address:

Telephone:

E-mail address:

Name 2:

Position:

Address:

Telephone:

E-mail address:

### Representative's details

Representative's Company name:

Contact name at Representative's Company:

**Personal statement – Tell us about yourself**

Please ensure that you submit a copy of your personal statement with this application form. Your personal statement should outline, in a minimum of 250 words, your motivations for studying, the reasons why you chose your course and Ulster University specifically, what you hope to achieve in the future and how the course is relevant to these plans.

**Please ensure your personal statement is signed and dated by hand before your application is submitted.**

**Why have you chosen to study at Ulster University?**

**Why have you chosen to study this course?**

**How does this course relate to your future career plans?**

**If there are any time gaps between your work and study, please detail any other activities/projects you have been involved with**

### Medical requirements

Do you have a medical condition or disability that might affect your studies and for which special arrangements might have to be made?  Yes  No

### Work experience

Please ensure that you submit a copy of your Curriculum Vitae (CV) with this application form. Your CV must clearly show what you have been doing since you last studied (e.g. your employment history).

### Checklist

Please tick the boxes to confirm which copies of the following documents you have sent with your application

Copy of passport personal details page	<input type="checkbox"/> Yes
Copy of previous qualifications, including final certificates and transcripts, translated into English (if not already in English)	<input type="checkbox"/> Yes
Copy of your CV	<input type="checkbox"/> Yes
Copy of your Personal Statement	<input type="checkbox"/> Yes

### DECLARATION

I confirm that the information I have submitted on this application form is accurate and complete and that I have completed this form myself. I accept that Ulster University (London and Birmingham Branch Campuses) reserves the right to cancel my application if any of the information that I have submitted is subsequently found to be false or inaccurate and that by signing this declaration I am bound by the terms and conditions as outlined on the London and Birmingham Branch Campuses website. I give consent to the London and Birmingham Branch Campuses to process the information on, and submitted with, this form for administrative purposes and for consideration of my application, but only insofar as it is permitted to do so within the constraints imposed by the Data Protection Act 1998. In particular, I understand that the University may continue to process this information even if I am refused admission or if it should decline an offer of admission.

Signed:

Date:

If you are under the age of 18 you must provide the name and approval signature from a parent or guardian.

Name of Parent/Guardian:

Signed:

Date:

Please send your completed application form, along with your additional documents to: [home.admissions@qa.com](mailto:home.admissions@qa.com)

### Ethnic Origin/Equal Opportunities Monitoring

The University is committed to providing equal opportunities for all. To assist us with our monitoring please choose one selection from the bold options A–F to indicate your ethnic group. Then tick the appropriate box immediately after this grouping to indicate your cultural background.

This form will be separated from your application and the information supplied will be recorded for statistical monitoring purposes. This information will not be considered as part of the admissions process.

<b>A) White</b>	<b>B) Black or Black British</b>	<b>C) Asian or Asian British</b>			
British	Caribbean	Indian			
Irish	African	Pakistani			
Scottish	Other Black Background	Bangladeshi			
Welsh		Other Asian Background			
Other White Background					

<b>D) Chinese</b>	<b>E) Mixed</b>	<b>F) Other Ethnic Background</b>			
Chinese	White & Black Caribbean	Not Known			
	White & Black African	Information Refused			
	White & Asian				