



*Your bridge to success*

## STUDENT APPLICATION FORM

If you do not receive an acknowledgement within 5 working days, please contact us

Please complete all parts of this application form for a place to study with us. All details that you provide on this form are treated in confidence, and the information is securely stored in accordance with our Data Protection Policy (available on request)

### General Information

Date of Application:

Course applied for (list subjects):

**A-level / GCSE / other** (please delete)

When do you hope to begin your course of study?

**September 20 / January 20**

Date of birth:

First name(s):

Mr / Miss / Ms / Mrs / Other

Last name:

Home address:

  
  
  
  
  
  
  
  
  
  
**Country:**

Postcode/Zip:

Email:

Home phone number:

Mobile phone number:

Names of parents/guardians (if under 18):

Contact number(s) for parents/guardians:

National Insurance No (if known and UK citizen):

Nationality:

Usual country of residence:

Have you lived in the EU for the last 3 years?

If Yes, were you in full-time education?

If no, please tell us what you were doing:

### Overseas students:

If you do not live in an EU/EFTA country or you have not been living and working in the UK for the past three years or more, you are classed as an overseas student. We need to see evidence that you can stay in the UK for the duration of the course

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In order that Western Tutorial College, Bristol is aware of any particular educational/health or other issues you may have that could require special consideration, please delete as appropriate from this list.

Visual impairment	<input type="text" value="Yes / No"/>
Heart condition	<input type="text" value="Yes / No"/>
Diabetes	<input type="text" value="Yes / No"/>
Dyslexia	<input type="text" value="Yes / No"/>
Have you had learning support before?	<input type="text" value="Yes / No"/>
Do you have or have you ever had a statement of educational needs?	<input type="text" value="Yes / No"/>
Other learning difficulties	<input type="text" value="Yes / No"/>
Do you carry any routine/prescribed medicines?	<input type="text" value="Yes / No"/>
Do you have any allergies?	<input type="text" value="Yes / No"/>
Hearing impairment	<input type="text" value="Yes / No"/>
Mobility difficulties	<input type="text" value="Yes / No"/>
Emotional/behavioural difficulties	<input type="text" value="Yes / No"/>
Asthma	<input type="text" value="Yes / No"/>
Have you had extra time or reader or scribe for exams before?	<input type="text" value="Yes / No"/>
Speech difficulties	<input type="text" value="Yes / No"/>
Epilepsy	<input type="text" value="Yes / No"/>

If you answered 'yes' to any of the statements above, please give further details here. Please also tell us about anything else that you feel we need to know, so that we can make your time with us a success.

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### Your Previous / Current Education

Please list all your educational qualifications (for example, GCSEs, A Levels, BTECs, Access courses, NVQs, and any other qualifications).

Most recent or current College / School / Other:

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From:

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To:

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Qualifications from the above (including subject and awarding body, grades and/or predicted grades)

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Previous College / School / Other (not including pre 11):

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From:

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To:

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Qualifications (including subject and awarding body, grades and/or predicted grades)

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### Reference Details

We may need to ask your current / most recent school / college / institution for a reference. Please provide their contact details below. All references are treated in confidence.

Name / position of contact:

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School / College / Institution and Address:

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Telephone:

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Email:

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## Additional Information

So that we can ensure you are studying the best programme for your future goals, please tell us a bit about yourself and your plans for the future – thank you. You can include:

Why you want to do the course, and what your future education and career plans are  
What your relevant interests or hobbies are, and any achievements (e.g. DoE award, etc)  
Anything else you want to tell us about

How did you find out about the Western Tutorial College, Bristol?

Personal enquiry	Yes / No
Our website	Yes / No
School / College	Yes / No
Employer	Yes / No
Other agency (please specify.....)	Yes / No
Recommendation	Yes / No
Open Day	Yes / No
Radio	Yes / No
Mailshot	Yes / No
Newspaper/magazine	Yes / No
Poster/Leaflet	Yes / No
Exhibition	Yes / No

Do you have any criminal convictions or pending court cases?  Yes / No

I declare to the best of my knowledge the information I have given is a true and correct record and I give my consent to the Western Tutorial College to process this in accordance with the Data Protection Act 1998. Please tick

Your application will be acknowledged promptly and carefully considered. We may ask you to attend an interview and a diagnostic test. If you are offered a place to study with us, you will receive a letter and/or e-mail detailing this offer, together with a request for the confirmation deposit required and other information relevant to beginning your course

**When complete, please email or post this application form to:**

[principal@westerntutorialcollege.co.uk](mailto:principal@westerntutorialcollege.co.uk)

**Western Tutorial College, Tower House (12<sup>th</sup> floor), Fairfax Street, Bristol, BS1 3BN**

We do hope that you are able to study with us, and look forward to welcoming you soon

The Western Tutorial College, Bristol – *your bridge to success*