

Application Form



University of
HUDDERSFIELD

Queensgate, Huddersfield HD1 3DH

Solely for use for applications not handled by the Universities and Colleges Admissions Service (UCAS) or other clearing houses.

Please read the accompanying Notes for Guidance before completing this form.

1. Personal Details		Title <input style="width: 50px;" type="text"/>						
Mr/Ms/Miss/Mrs etc.								
Surname/Family Name (BLOCK CAPITALS)								
First name(s)								
Previous surname, if changed								
Correspondence address								
Postcode								
Telephone No (including STD code)	Daytime	Evening						
Fax No:								
Email:								
Home address (if different)								
Postcode								
Telephone No (including STD code)	Daytime	Evening (if different)						
Fax No:								
Sex: Male (M) <input type="checkbox"/>	Date of birth	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><th>Day</th><th>Month</th><th>Year</th></tr><tr><td> </td><td> </td><td> </td></tr></table>	Day	Month	Year			
Day		Month	Year					
Female (F) <input type="checkbox"/>	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><th>Day</th><th>Month</th><th>Year</th></tr><tr><td> </td><td> </td><td> </td></tr></table>	Day	Month	Year				
Day	Month	Year						
Your age on 31 December in year of entry	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> Years	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> Months						

2. Disability/special needs
Please enter the appropriate code in the box provided if you have a physical or sensory disability which might in some way affect your studies at the institution or may require special facilities or treatment. (see Notes for Guidance)
<input style="width: 100px; height: 20px;" type="text"/>
Please provide full details in Section 10.

3. Fee Status							
Country of Birth							
Nationality							
Country of domicile or area of permanent residence							
Applicants not born in the European Union please state:							
Date of first entry to the EU	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><th>Day</th><th>Month</th><th>Year</th></tr><tr><td> </td><td> </td><td> </td></tr></table>	Day	Month	Year			
Day	Month	Year					
Date of most recent entry to the EU	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><th>Day</th><th>Month</th><th>Year</th></tr><tr><td> </td><td> </td><td> </td></tr></table>	Day	Month	Year			
Day	Month	Year					
Date from which you have been granted permanent residence in the EU	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><th>Day</th><th>Month</th><th>Year</th></tr><tr><td> </td><td> </td><td> </td></tr></table>	Day	Month	Year			
Day	Month	Year					
Passport Number:							
Date of Issue:							
Payment of fees							
Who is expected to pay your fees? (research Council, LEA, yourself, family member, employer, other)							
If an LEA, which one?							
Have you previously received an educational award from UK public funds? YES/NO							
If so, please provide details:							
<table border="1" style="width:100%; border-collapse: collapse;"><tr><th>Funding Body</th><th>Course</th><th>Dates</th></tr><tr><td> </td><td> </td><td> </td></tr></table>	Funding Body	Course	Dates				
Funding Body	Course	Dates					

4. Details of course(s) to which you wish to apply			
Month and year in which you wish to start			
Course Title	Mode of study: full-time/sandwich/part-time/ other/ Please specify	Year of Entry	Stage ie Year 1 Year 2
Please indicate how you heard of these courses			

Confidential Statement by referee

Name of referee _____

Post/occupation/relationship _____

Address _____

Telephone No
(including STD)Fax No
(including STD)

This form may be photocopied: please type with a good black ribbon or write in black ink within the frame. Typing is very much preferred. Please affix official stamp where appropriate, at the end of the statement.

Name of applicant (*block capitals or type*) _____

Section 8 checked
as correct

 Yes/No

Please return to:
International Office
University of Huddersfield
Queensgate
Huddersfield HD1 3DH
UK

Signed _____

Date _____