

Application form

For Office use only

Please read the preceding instructions for completing this form.

This form will be photocopied. Please type or write clearly in block capitals in black ink. Tick boxes \checkmark as appropriate

1 Your personal and contact details								
Title (eg Mr, Ms, Dr etc)				Gender	male	• 🗆	female	
Last name								
First name(s)								
Official name (as it appears on your passport/national identity card) fd								
Date of birth	day	month	year	Last name	on 16 th bi	irthday		
Address	Home	1		(Correspo	ndence	(if different from h	iome address)
					c/o IE	EC Onli	ne GmbH	
					Marier	nstrass	se 19-20	Marienstrasse 19/20, D-10117 Berlin Tel. +49 (0)30-20458687
Destado					Berlir	1		www.ieconline.de
Postcode					10117			
Country					Germar	ny		
E-mail					info@i	ieconl	ine.de	
Telephone numbers (please include full country and area code)								
Daytime	+49-30-2	0458687		Evening	[
Mobile				Fax numbe	r	+49-30	0-20458688	
Applications for Nursing and Education courses only								
Nursing reference number								
Nursing reference hun								
Teacher Ref Number (D	fES number)						
2 Details of you	r propos	ed progr	amme of	study Comp	lete either	taught co	urses or researc	h programme as

Taught courses on	ly		_	
Mode of study	Full-time	Part-time	Distance learning	other short-term
Proposed start date	month	year]	
Award	Cert HE	HNC, HND 🗌	BA, BSc, BEng, BSc 🗌	MBA, MA, MSc, MEna, PaDip, PaCert 🗌
	other please sp	pecify		
Course title				
Year of entry	year 1 🗌	year 2	year 3]
Research programn	nes only			
Mode of study	Full-time	Part-time	other please specify	
Proposed start date	month	year		
Award	MPhil 🗌	PhD 🗌	DBA, EdD 🗌 other	please specify
Proposed title/subject/	area(s)			
-		-	your proposed area of rese maximum) - see Section	

3 Nationality							
Country of birth (the country where	e you were born)						
Nationality (the country for which you are entitled to hold a passport)							
Country of domicile (the country you live in)							
Do you require a student visa to study in the UK? Yes No							
If you answer yes to the above qu appropriate visa documentation. the application process.	-		-	-			
Passport number							
Are you a non-EU citizen currently	resident in the UK?	Yes 🗌 No 🗌					
If you answer yes to the above ple course fee information.	ease provide the following	information in order to as	sist us in prov	iding you with the correct			
When did you enter the UK?							
What is your immigration status?							
4 English language							
Do you hold any English language o	qualifications? Yes	s 🗌 No 🗌					
Do you intend to sit an English lang		coming to study at Sheffie	ld Hallam				
University?				Yes 🗌 No L			
English language qualifications (plea				Yes ∟ No L			
)	Overall ba				
English language qualifications (please of the second seco	ase attach copies of all certificates)					
English language qualifications (please of the second seco	ase attach copies of all certificates)					
English language qualifications (please of qualification and the second	Test reference num) ber		and result			
English language qualifications (please of qualification and the second	Test reference num) ber Writing score		and result Speaking score			
English language qualifications (please of qualification) Listening score TOEFL	Test reference num Reading score Which version did yo) ber Writing score	Test scor	and result Speaking score			
English language qualifications (please IELTS Date of qualification Listening score TOEFL Date of qualification Other English qualification	ase attach copies of all certificates Test reference numl Reading score Which version did yo computer based, internet) ber Writing score	Test scor	and result Speaking score			
English language qualifications (please IELTS Date of qualification Listening score TOEFL Date of qualification Other English qualification Awarding organisation	Asse attach copies of all certificates Test reference num Reading score Which version did yo computer based, interne Award and course titl month urses and research degre	ber Writing score Writing score	Test scor	and result Speaking score			
English language qualifications (please IELTS Date of qualification Listening score TOEFL Date of qualification Other English qualification Awarding organisation Date of award or expected award Applications for postgraduate course	Asse attach copies of all certificates Test reference num Reading score Which version did yo computer based, interne Award and course titl month urses and research degre) ber Writing score wu take (paper based, et based) le year es only	Overall ba	and result Speaking score			

6 Education

Your application will be considered on the basis of your education. You should therefore give full and accurate details of your education background in this section. You must include details of **all** study undertaken at degree level or above.

Qualifications and examinations (including professional training)						
Awarding institution	Award and course title		Main subjects studied	Results (including grade)		
	start date	end date				
Date of award	month	year	Mode of attendance		CATS points	
or expected award		,			(if applicable)	
Awarding institution	Award and course t	itle	Main subjects studied		Results (includi	ng grade)
	start date	end date				
Date of award	month	year	Mode of attendance		CATS points	
or expected award	monut	your	mode of allendance		(if applicable)	
Awarding institution	Award and course t	itle	Main subjects studied		Results (includi	ng grade)
	start date	end date				
	month	year				
Date of award or expected award	monu	your	Mode of attendance		CATS points (if applicable)	
Awarding institution	Award and course t	itle	Main subjects studied		Results (includi	ng grade)
	start date	end date				
Date of award or expected award	month	year	Mode of attendance		CATS points (if applicable)	

10 Referees						
		1			2	
Name						
Position						
Company/organisation						
Address						
Postcode						
Country E-mail address						
Phone number						
(including full country and area code)						
Fax number						
11 Financial information	n					
How will your tuition fees be paid	?					
	Employer		Scholarship 🗌	Government bo	av 🗖	Research council 🗌
Personal/lamily resources				Government bo	ау 🗀	
12 Data protection state	ement					
The information you supply on this form will be used by Sheffield Hallam University in accordance with the Data Protection Act 1998 and other applicable legislation. The University will use the information to process your application and to provide any relevant further information by post, e-mail or text. It will also be used to support the University's marketing and market research activities. Please tick if you do not wish to receive further information by $\begin{array}{c c} Post \ Text \ E-mail \ Phone \ \end{array}$ If at any time you change your mind and you would like the University to stop sending such information, please contact the Department of Marketing, Sheffield Hallam University, Sheffield S1 1WB or e-mail marketing@shu.ac.uk. If you accept a place at the University and meet the conditions of the offer, the information from your application form will be used to set up a student record on the University's student information (SI) system. Where required this information may be shared with the government or their respective agents to check the accuracy of personal information provided by students against external data sources such as the Higher Education Statistics Agency (HESA), or the Learning Skills Council Individual Learner Record (LSC ILR), returns. The University may also contact other institutions to confirm previous qualifications obtained. In order to prevent and detect fraud, we reserve the right to, or may be required to, share this information with external organisations such as the police, the Home Office, the Foreign Office, the UK Border Agency and local authorities. The University does not share the information you have provided with any other third party, except research agencies which						
assist with or carry out research and service providers who deliver e-mail and text messages on the University's behalf. The University ensures that such agencies will also handle personal data in accordance with the Data Protection Act.						
13 Declaration						
I confirm that, to the best of my k requested or other material infor University. I understand that any conditions, which I have receive I accept that if I do not fully compl application and I shall have no c	mation has be offer of a place d and read. I y with these re	en omitted. I give n e on the above cou understand what th quirements, Sheffie	ny consent to the purse is subject to my ney say, and I agree and Hallam University	rocessing of my acceptance of the to abide by the y reserves the rig	data by S ne Univer e conditio pht to can	Sheffield Hallam sity's terms and ons set out there.
Applicant's				Date		

Please send your completed application form to Direct Admissions, Surrey Building, City Campus, Howard Street, Sheffield S1 1WB unless you have been dealing with a specific faculty contact or research area in which case you application should be sent directly to this contact.

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Please note this section of the application will not be used in the consideration of your application

Disabilities and support needs

If you declare a disability this will not be a factor in the university's decision as to whether or not to offer you a place. However it is important that the University knows if you have any specialist needs in order that we can provide you with appropriate support and facilities.

This information will remain strictly confidential.

Do you consider yourself to have a disability	Yes No
Type of disability	
Specific learning disability eg dyslexia, dyspraxia etc. \Box	Blind/partially sighted
Deaf/hearing impairment	Wheelchair user/mobility difficulty
Autistic spectrum disorder/Asperger syndrome	Mental health difficulty
Multiple disabilities Unseen disability eg diabetes, cancer, epilepsy, asthma etc.	Personal Care Support
	please specify
Other please specify	
Nature of support required	
Do you agree that this information can (where applicable) be sha suitable support? Yes No	ared with the course leader in order to ensure the provision of

Equal opportunities monitoring		
Ethnic origin White Black or Black British - Caribbean Black or Black British - African Other Black background	Asian or Asian British - Indian Asian or Asian British - Pakistani Asian or Asian British - Bangladeshi Chinese	Other Asian background Mixed - White and Black Caribbean Mixed - White and Black African Mixed - White and Asian Other Mixed background Other Ethnic background Prefer not to say
Religion		

MORE INFORMATION

For more information about courses, research and applications use the contact details given below.

0114 225 5555

MINICOM 0114 225 3964 directadmissions@shu.ac.uk Marienstrasse 19/20, D-10117 Berlin Tel. +49 (0)30-20458687 www.ieconline.de

This information can be made available in other formats. Please contact us for further details.

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