

# APPLICATION FORM

FOR POSTGRADUATE APPLICATIONS TO LONDON SOUTH BANK  
UNIVERSITY

## PERSONAL DETAILS

Title	
First/given name(s)	
Surname or family name	
Date of Birth	
Adress	
Mobile number	

## COURSE INFORMATION

Course	
Start date	

## FURTHER DETAILS

Country of birth	
Date of first entry to live in the UK	
Nationality	
Area of permanent residence (e.g EU National)	

## HOW DO YOU PROPOSE TO FINANCE FEES AND SUBSISTENS COST FORT HE COURSE OF STUDY?

- Self/Family
- Employer
- Scholarship
- Other

## DO YOU HAVE A RELEVANT CRIMINAL CONVICTION?

- Yes
- no

## DISABILITY/SPECIAL NEED

- no
- yes, please explain:

## SCHOOL/HIGH SCHOOL DETAILS

School or college name	
Start date (mm/yyyy)	
End date (mm/yyyy)	
Attendance	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Sandwich

## UNIVERSITY/COLLEGE DETAILS

Institution name	
Language of Instruction	
Start date (mm/yyyy)	
End date (mm/yyyy)	

Attendance	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Sandwich <input type="checkbox"/> Distance Learning
Award Level	
Award Title	
Result/Classification	

### ENGLISH PROFICIENCY

- IELTS**  
 Test centre: \_\_\_\_\_ Date: \_\_\_\_\_  
 Reading: \_\_\_\_\_ Writing: \_\_\_\_\_  
 Listening: \_\_\_\_\_ Speaking: \_\_\_\_\_
  
- TOEFL**  
 Test centre: \_\_\_\_\_ Date: \_\_\_\_\_  
 Reading: \_\_\_\_\_ Writing: \_\_\_\_\_  
 Listening: \_\_\_\_\_ Speaking: \_\_\_\_\_
  
- Other:**

### WORK EXPERIENCE

Employer name	
Employer address	
Telephone number	
Job description	
When did you start?	
When did you finish?	
Full or part time?	
Voluntary?	

Employer name	
Employer address	
Telephone number	
Job description	
When did you start?	
When did you finish?	
Full or part time?	
Voluntary?	

## REFEREE DETAILS

### Referee 1

Name	
Position/Relationship	
Organisation	
Address	
Email	
Telephone	

### Referee 2

Name	
Position/Relationship	
Organisation	
Address	

Email	
Telefon	

## DECLARATION

I confirm that the information given on this form is true, complete and accurate and no information or other material information has been omitted. I accept that if this is not the case, UKPASS shall have the right to cancel my application and I shall have no claim against UKPASS or any other higher education institution or college in relation thereto. I give my consent to the processing of my data by UKPASS and educational establishments. You have the right to cancel this application. If you decide not to take up your place at the university or college you must do this by informing the university or college who have offered you the place as soon as possible.

Place	
Date	
Signature	