

# Direct Application for Admission Glyndŵr University



**Please complete each section of this form clearly using black ink and BLOCK CAPITALS.**

Where you are required to make a selection, please highlight the appropriate choice.

Mae'r ffurflen hon ar gael yn Gymraeg ar gais - This form is available in Welsh upon request

## Programme of application:

Full title of course: \_\_\_\_\_

Entry onto year: Kick-start  1  2  3 Postgraduate      Mode of study: Full Time  Part Time       Month/Year of Entry: \_\_\_\_\_ / \_\_\_\_\_

## Your personal and contact details:

Title: Mr Ms Miss Mrs Other: \_\_\_\_\_      Sex: Male Female      Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Surname(s): \_\_\_\_\_

First name(s): \_\_\_\_\_

Preferred name (if different): \_\_\_\_\_      Previous surname (if different): \_\_\_\_\_

Nationality: \_\_\_\_\_      Country of birth: \_\_\_\_\_

If your country of birth is outside the EU: Date of entry to live in the EU: \_\_\_\_\_      Passport number: \_\_\_\_\_

Home phone number: \_\_\_\_\_      Mobile phone number: \_\_\_\_\_

Primary Email address: \_\_\_\_\_ You should notify us immediately if this changes

Secondary Email address: \_\_\_\_\_ You should notify us immediately if this changes

Home address: \_\_\_\_\_      Correspondence address: Please complete this if it is different to your home address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Town: \_\_\_\_\_      Town: \_\_\_\_\_

County/State: \_\_\_\_\_      County/State: \_\_\_\_\_

Country: \_\_\_\_\_      Country: \_\_\_\_\_

Postcode: \_\_\_\_\_      Postcode: \_\_\_\_\_

## Your fees:

Who is responsible for paying your fees? Where known, please indicate the proportion/amount each party is to pay.

Self:       Student Loan Company:       Employer:       Welsh Assembly Government:

Other (please state, eg DFES): \_\_\_\_\_      Address if other: \_\_\_\_\_

If you are an International applicant but feel that you may be entitled to pay Home Fees under the UKCISA guidelines, please complete the Fee Status Assessment form and return it, with all supporting documents, at the same time as your application form.

<b>Office use only:</b>	Applicant number: _____	Decision: Unconditional <input type="checkbox"/> Conditional <input type="checkbox"/> Reject <input type="checkbox"/>
Form received: _____	Received by School Office: _____	Conditions: _____
Entered onto SITs: _____	Decision made by: _____	_____
Checked by SDS: _____	Letter sent: _____	Course/Year changes: _____



## Your employment history:

Please list your present and previous employment, in chronological order with the most recent first.

Job Title	Employer	Key duties	Full-time/ Part-time	Start date	End date

## Your personal statement:

Please include your personal statement - Explain why you wish to study this course, outlining your skills and experiences, and any other information that may be relevant to your application. You may use continuation sheet(s) if required.

## Your specific support needs:

Physical or sensory disability

Learning support

Medical

Please give details below:

## Your reference:

Please provide the contact details for your primary referee. This should be a professional person who you are not related to, such as a tutor, who has known you for at least one year.

Name of Referee: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

Email address of Referee: \_\_\_\_\_ Telephone number of Referee: \_\_\_\_\_

Postal address of the Referee: \_\_\_\_\_

## Additional information:

Do you have a relevant criminal conviction? Please see the 'How to apply' section of our website for guidance.

Yes:  No:

Have you ever been in Local Authority care? *Please answer if you are an applicant from the UK only.*

Yes:  No:

Do you or any of your parents, step-parents or guardians have any Higher Education qualifications, such as a Degree, Diploma or Certificate of Higher Education?

Prefer not to say:  Yes:  No:

Are you related to a member of staff at Glyndŵr University?

Yes:  No:

What is their name?: \_\_\_\_\_ What is their relationship to you?: \_\_\_\_\_

If you are currently in full-time education, please state the occupation of the highest-earning family member of the household in which you live? If they are retired or unemployed, please give their most recent occupation. If you are not in full-time education, please state your own occupation or most recent occupation.

*This question is optional.*

Occupation: \_\_\_\_\_

How did you find out about Glyndŵr University?

Friend or family:  School, College or University:  Glyndŵr University website:  Education UK website:

Education exhibition:  Recruitment Agent:  Current Student:  Other source:

## Your declaration and return instructions:

I confirm the details I have provided, along with all supporting evidence is true and accurate, and, if appropriate, I have read and understood Glyndŵr University's Tuition Fee Regulations and Admissions Policy. I understand that the information provided is confidential, but may be passed to official UK government bodies to assist them with their duties if requested, or to provide statistics to statutory agencies. The information will also be used to help us to provide our students with appropriate support on the commencement of their studies.

Applicant signature:

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please fully complete this form and return it with the required supporting documents:

By post to: The Admissions Office, Glyndŵr University, Mold Road, Wrexham, LL11 2AW, UK  
By email to: admissions@glyndwr.ac.uk

*If you are applying as an International student via an agent: Find agents at glyndwr.ac.uk.*