



International UCFB Application Form

Please complete this form in full and return it by email to international@ucfb.com, along with your reference, personal statement and qualifications. If these are not currently available, please let us know.

Office Use Only
Agency Name _____ Agency Email Address _____ Agency Phone No. _____

Office Use Only - Date Received: _____ Student ID: _____

Personal Details

Title (Mr, Miss, Mrs, other)

Date of Birth (dd/mm/yy)

Surname

Gender

First Name(s)

Nationality

Previous Surname

Country of Birth

Permanent Address

Do you require a visa to work or study in the UK?

If you are currently in the UK on a visa, please list the details below:

UK Address (if different from above)

Visa Type

Expiry date

Have you previously applied for a visa, or have been to the UK?

If yes, please complete the UKVI History Form

Mobile Phone number

Do you have any criminal convictions?

Home phone number

If you would like to authorise another person to discuss your application with UCFB, please provide their details below:

UK Mobile Number (If different from above)

Name of authorised person

UK landline number

Relationship to you

Email address

Passport Details: Name on Passport Passport No. Issue Date Expiry Date

Which course(s) you would like to apply

Undergraduate	<input type="text"/>	Start date	<input type="text"/>
Postgraduate	<input type="text"/>	Start date	<input type="text"/>

Qualifications

Please make sure that you list all relevant qualifications, starting with the most recent. **If you are still part way through completing any qualifications, please list them in the box at the bottom of the page.**

If your qualifications were studied in non-majority English speaking countries you may be asked to take or provide evidence of a suitable English qualification such as IELTS. Please continue on a separate sheet if needed.

Start & End Date (mm/yyyy)	Qualification Type	Subject(s) & Grade	School or Institution	Country

Pending Qualifications

Please list all qualifications or exams you will be completing before registration.

Start & expected End Date (mm/yyyy)	Qualification Type	Subject(s) & Grade	School or Institution	Country

For Information on the English Language requirements set by the UKVI and a list of approved Majority English Speaking countries, please visit <https://www.gov.uk/tier-4-general-visa/knowledge-of-english>.

Employment (Please include CV if you would like to attach further information)

Most recent employer

Role

Dates employed

Previous Employer

Role

Dates employed

Ethnicity

Please enter the number which best describes your ethnicity.

- | | | | |
|----|--------------------------------------|----|-----------------------------------|
| 10 | White | 34 | Chinese |
| 13 | White - Scottish | 39 | Other Asian background |
| 14 | Irish Traveller | 41 | Mixed - White and Black Caribbean |
| 15 | Gypsy or Traveller | 42 | Mixed - White and Black African |
| 19 | Other White background | 43 | Mixed - White and Asian |
| 21 | Black or Black British - Caribbean | 49 | Other mixed background |
| 22 | Black or Black British - African | 50 | Arab |
| 29 | Other Black background | 80 | Other ethnic background |
| 31 | Asian or Asian British - Indian | 90 | Not known |
| 32 | Asian or Asian British - Pakistani | 98 | Information refused |
| 33 | Asian or Asian British - Bangladeshi | | |

Disability

If you have a disability, please enter the number which best applies to you.

- 08 Two or more impairments and/or disabling medical conditions
- 51 A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D
- 52 General learning disability (such as Down's syndrome)
- 53 A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder
- 54 A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
- 55 A mental health condition, such as depression, schizophrenia or anxiety disorder
- 56 A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches
- 57 Deaf or serious hearing impairment
- 58 Blind or a serious visual impairment uncorrected by glasses
- 96 A disability, impairment or medical condition that is not listed above
- 97 Information refused

If you have listed a disability, please provide details of any additional support you may need during your studies.

Where did you hear about UCFB?

Please tick one option only

- Wembley Stadium Burnley FC Friends / Family Education Fair TV Search Engine
 UCFB Website Social Media Other

Personal Statement

Your personal statement needs to clearly demonstrate that you are a suitable candidate for this course and should be around 500 words in length. It must demonstrate why you want to study on this course, how you expect this course to benefit your career and if you are applying from overseas, why you are interested in studying in the UK. Please attach your personal statement as a full sheet of A4 on a separate document.

- Please tick to indicate that you have completed and attached your personal statement.

Reference

We would like you to provide two supportives reference which should be from an academic and professional source, ideally somebody qualified to comment on your suitability for the course for which you are applying. References should be scanned on letter headed paper and sent with your application or emailed direct to us at international@ucfb.com

- My references have been scanned and attached to this application.
 My references will be forwarded separately.

Academic certificates

Please provide a copy of all relevant certificates with your application. If you are still studying or waiting for copies of your certificates then can be sent to us separately when they are available by scanning and emailing them to international@ucfb.com

- My certificate(s) have been scanned and attached to this application.
 Some or all of my certificates will be forwarded separately once they are available.

Declaration

I declare that to the best of my knowledge, all information contained in this form (and any additional documents submitted) are correct and complete.

I authorise UCFB and Bucks New University to process, store and review all information submitted as part of the Postgraduate application process.

I will inform UCFB of any changes to my personal circumstances which may affect my application to study on this programme.

If completing this form electronically, please type your name and the date in the below box.

Signed

Date