



STUDENT APPLICATION 2020/21

For September 2020 entry

Confidential

PERSONAL DETAILS

Title	Family name (as shown on your passport)		
Date of Birth	First name(s)/Given name(s) inc all middle names		
Preferred name	Legal gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Preferred gender
			Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary <input type="checkbox"/> Other <input type="checkbox"/>
Email	Home Address		
Postcode	County	Country	
Telephone	Mobile		

PARENT/CARER/NEXT OF KIN DETAILS

Name	Name		
Relationship to student	Relationship to student		
Address		Address	
Postcode	Daytime Telephone	Postcode	Daytime Telephone
Email	Email		

On some occasions we may want to contact your parents/carers about your college studies. If you **DO NOT** give us permission to contact them please tick: If there is a safeguarding issue we will contact your parent/carer and override this permission.

Who do you live with? Please tick relevant box.

My parents
 On my own
 Aunt/Uncle
 Grandparent
 Other Please specify relationship to you

EMERGENCY CONTACT DETAILS

This is addition to your parental contacts and can be a relative or family friend over the age of 18:

Name	Name		
Relationship to student	Relationship to student		
Address		Address	
Postcode	Daytime Telephone	Postcode	Daytime Telephone
Email	Email		



RESIDENCY – PLEASE ANSWER ALL 3 QUESTIONS

Do you permanently reside in the UK? Yes No

Have you lived outside the EU in the last 3 years? Yes No

Are there any restrictions on your length of stay in the UK (e.g. Visa)? Yes No

If you are European, please state which country you are from?

EQUALITY & DIVERSITY

Please tick the box that best describes your ethnic origin

White	Asian/Asian British	Black/African/Caribbean/Black British	Other ethnic group
<input type="checkbox"/> English/Welsh/Scottish/Northern Irish/British	<input type="checkbox"/> Indian	<input type="checkbox"/> African	<input type="checkbox"/> Arab
<input type="checkbox"/> Any other White background	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Caribbean	<input type="checkbox"/> Any other ethnic group
	<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Any other Black/African/Caribbean background	
Mixed/multiple ethnic background	<input type="checkbox"/> Chinese		
<input type="checkbox"/> White and Black Caribbean	<input type="checkbox"/> Any other Asian background		
<input type="checkbox"/> White and Black African			
<input type="checkbox"/> White and Asian			
<input type="checkbox"/> Other mixed/multiple ethnic background			

What is your first language? Please state

ADDITIONAL SUPPORT

Do you have any additional support at school? Yes No

Tick if any of these apply to you:

Young Carer Support from an outside agency. Please state:

Medical Condition. Please state:

Disability. Please state:

Exam Concessions. Please state:

Tick if any of these apply to you. Do you currently have a:

EHCP (Educational Health Care Plan) PEP (Personal Education Plan) EHA (Early Help Assessment) PEEP (Personal Emergency Egress Plan)

Can we contact your school Yes No If there is a safeguarding issue we will contact your School and override this permission. On some occasions we may want to contact your School about your college studies.

STUDY PROGRAMME

Please select three of the following: A Levels/Vocational Extended Certificates OR 1 Vocational Extended Diploma OR 1 Level 2 Vocational qualification. If you wish to take more courses please discuss this at your interview.

1

2

3

ADDITIONAL INFORMATION

Please list any career fields that interest you

Please list Enrichment activities that you would like to do at Huish

Please tell us something about your interests and activities, also indicating if you have undertaken work experience or have a part-time job. You may also attach a personal statement if you prefer.

If you are investigating other options for next year, for example another college, please state here:



QUALIFICATIONS

Please complete sections below or attach a printed statement.

Subject	Exam Date	Level	Predicted grade	Result

Previous/most recent school

The information you have provided on this form will be used by the College for your support and guidance. We will use these contact details unless you speak to your tutor to request otherwise. If you enrol at the College, they will also be passed to the Education and Skills Funding Agency (ESFA), primarily for the collection and analysis of statistical data and for the management of the Learner Registration Service. The ESFA will also share this information with other organisations for the purpose of administration, careers and other guidance, and for statistical and research purposes. At no time will your personal information be passed to organisations for marketing or sales purposes. Both the College and the ESFA are registered under the Data Protection Act 1998.

Applicant signature Date Office only

When you have completed this form, please return it to your school or if applying independently please return to: Admissions Office, Richard Huish College, South Road, Taunton, TA1 3DZ. Telephone: 01823 320800. Email: hello@huish.ac.uk. For further information please visit our website www.huish.ac.uk



Date application received Date application acknowledged

[Empty input fields for dates]



