



# STUDENT APPLICATION 2021/22

For September 2021 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		
School	Have you studied at Richard Huish College before		
Yes <input type="checkbox"/> No <input type="checkbox"/>			

## PARENT/CARER/NEXT OF KIN DETAILS

Name	Name
Relationship to student	Relationship to student
Address	
Postcode	Daytime Telephone
Email	
<p>On some occasions we may want to contact your parents/carers about your college studies. If you <b>DO NOT</b> give us permission to contact them please tick: <input type="checkbox"/> If there is a safeguarding issue we will contact your parent/carer and override this permission.</p> <p>Who do you live with? Please tick relevant box.</p>	
<input type="checkbox"/> My parents <input type="checkbox"/> On my own <input type="checkbox"/> Aunt/Uncle <input type="checkbox"/> Grandparent <input type="checkbox"/> Other Please specify relationship to you <input style="width: 100px;" type="text"/>	

## 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	
Postcode	Daytime Telephone
Email	

**ALL SECTIONS OF THE FORM NEED TO BE COMPLETED BEFORE THE FORM CAN BE SUBMITTED**



## 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**

English/Welsh/Scottish/Northern Irish/British  Irish

Any other White background

**Asian/Asian British**

Indian  Pakistani  Bangladeshi  Chinese  Any other Asian background

**Black/African/Caribbean/Black British**

African  Caribbean  Any other Black/African/Caribbean background

**Other ethnic group**

Arab  Any other ethnic group

**Mixed/multiple ethnic background**

White and Black Caribbean  White and Asian  Other mixed/multiple ethnic background

White and Black African

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 Physical. Please state:

Medical Condition Mental 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.

COURSE NAME:	Level 2	A Level	Ext Cert	Ext Dip	INDIVIDUAL SUBJECT REQUIREMENTS ARE:
1					
2					
3					
4					

## ADDITIONAL INFORMATION

Please tell us about any career interests you may have

Please tell us about your hobbies and interests

**ALL SECTIONS OF THE FORM NEED TO BE COMPLETED BEFORE THE FORM CAN BE SUBMITTED**

## QUALIFICATIONS

Please complete sections below or attach a printed statement.

Subject	Exam Date	Level	Predicted grade	Result
Mathematics				
English Literature				
English Language				
Science				
1				
2				
3				

## ALL SECTIONS OF THE FORM NEED TO BE COMPLETED BEFORE THE FORM CAN BE SUBMITTED

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: admissions@huish.ac.uk. For further information please visit our website www.huish.ac.uk

For our Privacy Notices, please follow this link to our website <https://www.huish.ac.uk/about-huish/policies-and-procedures/privacy-notices/>



Date application received

Date application acknowledged


