



For office use only

Student ID number:

Course applying for:

Expected start date:

Level of course: Foundation  Undergraduate  Postgraduate

Partner Institution at which you will be studying:

### 1. Applicant details (as on your passport)

Title (Mr/Mrs/Miss/Dr): <input type="checkbox"/>		Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>		<b>Current address</b>	
First/Given Name: <small>(as given on your passport or official ID)</small>		<input type="text"/>		House Name/No Street: <input type="text"/>	
Last/Family Name: <small>(as given on your passport or official ID)</small>		<input type="text"/>		City/Town: <input type="text"/>	
Name by which you are commonly known		<input type="text"/>		Zip/Postcode: <input type="text"/>	
Date of birth: <small>(DD/MM/YY)</small>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		Country: <input type="text"/>	
Email address: <input type="text"/>				Mobile number <small>(with country code)</small> <input type="text"/>	
				Nationality <input type="text"/>	

### 2. English level

(e.g. IELTS, school certificate, Degree studied in English)

Score:

Date issued:

Expiry date:

### 3. Welfare

Do you have any disabilities? Yes  No  If yes please state:

Do you have any criminal convictions? Tick as appropriate: Yes  No

If you have answered YES to any of the above please provide full details with your application on a separate sheet

### 4. Highest and/or most relevant qualification(s)

1.

Course title: <input type="text"/>	
Course level: <input type="text"/>	Institution: <input type="text"/>
Start date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	End date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Final certificate date of issue: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Final transcript date of issue: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

2.

Course title: <input type="text"/>	
Course level: <input type="text"/>	Institution: <input type="text"/>
Start date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	End date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
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## 5. CV

Please attach your CV in English with details of your work experience to date (postgraduate applicants only or if specifically requested for your course).

## 6. Personal Statement

Please write a short statement (approximately 200 words) on a separate sheet to include the following:

- Why did you choose this course and how do you think it is relevant to your career?

## 7. Declaration

- I declare that the information I have supplied on this form is, to the best of my understanding and belief, complete and correct.  
Yes  No
- I understand that the giving of false or incomplete information may lead to the refusal of my application or cancellation of my enrolment  
Yes  No

### Checklist, please tick when complete

- Completed and signed application form
- Personal statement
- Copy of valid passport/official ID
- CV in English (postgraduate only unless otherwise required)
- Final certificate for qualifications listed (if available at time of application) enclosed or attached by email
- Transcripts for qualifications listed (if available at time of application) enclosed or attached by email
- Copy of IELTS certificate or equivalent (if available at time of application) enclosed or attached by email and all previous English Language qualifications

I confirm that, to the best of my knowledge, the information given is correct and complete. I have read the instructions, in particular those relating to this section. I understand what it says and I agree to abide by the conditions set out there, which I accept as a condition of application. I agree that the University can process my information for my application and internal research purposes.

Signed:

Date:

**By typing name in this box it is considered as a signature**

Once completed save this form and email with supporting information to the email address below.  
Do not print and complete by hand.

For more information or to submit this application please contact:

**United Kingdom Telecommunications Academy**

**Email: [applications@ukta.co.uk](mailto:applications@ukta.co.uk)**