

Dundee College

Application Form



Please refer to the Application Form —Important Information Section before completing

Choice of Course - Please ensure that you meet the specified entry requirements for your choice of course(s)

I wish to study (please tick) Full Time Part Time Open/Flexible Learning

1st Course Applied For: _____

If you want to, you can apply for more than one course. If you are unsure of your choice(s), please contact Student Services on 01382 834910 to discuss these with a Student Adviser

2nd Course Applied For (optional): _____

3rd Course Applied For (optional): _____

Previous Applications

Have you enrolled on a course at Dundee College in the past 5 years? Yes No If No, go to Personal Details

If YES, have you changed your name or address? Yes No If No, go to Personal Details

If YES, please tell us your previous name: _____

and/or previous address: _____

This ensures we link this application to your original ID Number and any previous records you have with us

Personal Details

Mr/Mrs/Miss/Ms/Other _____

Forename (s): _____

Surname: _____

Date of Birth: _____

Sex: Male Female

Scottish Candidate Number: (This is the number on your SQA/SCOTVEC Certificate)

National Insurance Number: _____

Email: _____

If you provide an email address we will use this to enter your application to our online system and contact you by email during the application process—see Important Information Section.

Address: _____

Postcode: _____

Tel No (home): _____

Tel No (mobile): _____

We will use this to text you during the application process

Ethnic Origin (please tick box)

Scottish	<input type="checkbox"/>	Any Mixed	<input type="checkbox"/>	Other Asian	<input type="checkbox"/>
English	<input type="checkbox"/>	Indian	<input type="checkbox"/>	Caribbean	<input type="checkbox"/>
Welsh	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>	African	<input type="checkbox"/>
Irish	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>	Other Black	<input type="checkbox"/>
Other White	<input type="checkbox"/>	Chinese	<input type="checkbox"/>	Any Other	<input type="checkbox"/>

Do you normally live in Scotland? Yes No

Do you require a visa to stay in the UK? Yes No

Country of Birth : _____ Nationality : _____

Country of Residence (if outside Scotland) : _____

Have you been resident in the UK/European Union for 3 years immediately before the start date of your course? Yes No

For Office Use Only

Comments (Admin) :

Application received		Application Acknowledged	
Reference received		Referred to Student Services	
Interview Date		2nd Interview Date (optional)	
Disclosure Sent		Disclosure No.	
Outcome Letter Sent		Interviewer	

INTERVIEW NOTES

INTERVIEW OUTCOME

Unconditional

Conditional

Waiting List

No Offer Possible

Please enter conditions below

Please enter reasons below

Signature _____ Date _____