

Application Form



University of
HUDDERSFIELD

Queensgate, Huddersfield HD1 3DH

Solely for use for applications not handled by the Universities and Colleges Admissions Service (UCAS) or other clearing houses.

SWIFT

ul. Kosciuszki 34, 0-012 Wroclaw, POLAND

1. Personal Details		
Title <input type="text"/>		<input type="text"/>
Mr/Ms/Miss/Mrs etc.		
Surname/Family Name (BLOCK CAPITALS)		
First name(s)		
Previous surname, if changed		
Correspondence address		
<input type="text"/>		
<input type="text"/>		
<input type="text"/>		
Postcode		
Telephone No (including STD code)	Daytime	Evening
Fax No:		
Email:		
Home address (if different)		
<input type="text"/>		
<input type="text"/>		
Postcode		
Telephone No (including STD code)	Daytime	Evening (if different)
Fax No:		
Sex: Male (M) <input type="checkbox"/>	Date of birth	<input type="text"/>
Female (F) <input type="checkbox"/>		<input type="text"/>
Your age on 31 December in year of entry		
<input type="text"/>	Years	<input type="text"/>
<input type="text"/>	Months	<input type="text"/>

2. Disability/special needs

Please enter the appropriate code in the box provided if you have a physical or sensory disability which might in some way affect your studies at the institution or may require special facilities or treatment. (see Notes for Guidance)

Please provide full details in Section 10.

3. Fee Status

Country of Birth

Nationality

Country of domicile or area of permanent residence

Applicants not born in the European Union please state:

Date of first entry to the EU

Date of most recent entry to the EU

Date from which you have been granted permanent residence in the EU

Day	Month	Year
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Payment of fees

Who is expected to pay your fees? (research Council, LEA, yourself, family member, employer, other)

If an LEA, which one?

Have you previously received an educational award from UK public funds? YES/NO

If so, please provide details:

Funding Body	Course	Dates
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Details of course(s) to which you wish to apply

Month and year in which you wish to start

Course Title	Mode of study: full-time/sandwich/part-time/ other/ Please specify	Year of Entry	Stage ie Year 1 Year 2
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please indicate how you heard of these courses

Confidential Statement by referee

Name of referee _____

Post/occupation/relationship _____

Address _____

Telephone No
(including STD)Fax No
(including STD)

This form may be photocopied: please type with a good black ribbon or write in black ink within the frame. Typing is very much preferred. Please affix official stamp where appropriate, at the end of the statement.

Name of applicant (*block capitals or type*) _____

Section 8 checked
as correct

 Yes/No

International Office
University of Huddersfield
Queensgate
Huddersfield HD1 3DH
UK

Signed _____

Date _____