

**Admissions Use Only:**

STUDENT CODE

ENTERED

# APPLICATION FORM FULL-TIME COURSES

Please complete in BLOCK CAPITALS in black ink or ballpoint pen as clearly as possible.

## 1. Personal Details

First Name(s)

Family Name

Title  Date of Birth

Address

Postcode

Home Phone No.

Mobile Phone No.

Email

Nationality

Country of Permanent Residence  Country of Birth

Do you hold an EU/British passport? Yes  No

Do you have a residency card, permit or visa? Yes  No

Have you been resident in the UK/EU/EEA for the past 3 years? Yes  No

If no, what was your date of entry into the UK/EEA?

### Ethnic Origins

English/Welsh/Scottish/  
Northern Irish/British

Irish

Gypsy or Irish Traveller

Any other White background

White & Black Caribbean

White & Black African

White & Asian

Any other mixed/multiple  
ethnic background

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background

African

Caribbean

Any other Black/African/  
Caribbean background

Arab

Any other ethnic group

Are you currently studying at SGS College?  
If so, on what course and who is your tutor?

Last school/college/university attended (other than SGS College)

Name, Contact Number and Email of  
Parent/Guardian (if you are under 18)

## 2. Course(s) you would like to apply for

Course applied for: (first choice)  Level

(second choice)  Level

(e.g. Diploma, Extended Diploma)

If you are applying for AS or GCSE courses, please give subject choices below.  
For AS, you may shortlist 5 subjects, but the maximum you can study is 4.

AS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GCSE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please state which campus you would like to study at:

Filton  WISE  Stroud  \*Queens Road

\*at Queens Road, you can only apply to study Foundation Art

Please provide the name and address of at least 2 referees whom we can contact to obtain a reference – the referee can be from your school or a current employer.

As part of the admissions process, you will be invited to an interview.  
Are there any dates that you CANNOT attend an interview?  
If so, please state which dates you CANNOT attend.

### 3. Qualifications (including predicted grade if awaiting results) – Please indicate if the grade is Actual or Predicted

Subject	Grade	Date achieved/ will achieve	Subject	Grade	Date achieved/ will achieve

Please continue on a separate sheet if necessary.

#### LONG-TERM DEVELOPMENT

Why do you want to do the course that you have applied for and what do you hope to do after the completion of your course?

### 4. Additional Support and Additional Information

Please complete

At the College, we support many students who need additional support with reading or writing, learning difficulties, disabilities or other difficulties. Please complete the section below to identify any support that you may require. This will help us arrange support for you. Please note, if you are aware of a support need and do not declare it, this may affect us being able to provide necessary support for you at a later date on your course.

Do you/will you have an Educational Health Care Plan (EHCP) for when you come to College? Yes (1)  No (2)

Do you currently have a My Plan/My Plan Plus or PEPS Plan in place? Yes (1)  No (2)

Do you consider yourself to have a learning difficulty, disability and/or health problem that the College should be aware of and/or that you may need support for? Yes (1)  No (2)

- Visual impairment   
  Hearing impairment   
  Disability affecting mobility   
  Profound complex disabilities   
  Social and emotional difficulties  
 Mental health difficulty   
  Moderate learning difficulty   
  Severe learning difficulty   
  Dyslexia   
  Dyscalculia   
  Autism spectrum disorder  
 Asperger's syndrome   
  Temporary disability after illness (e.g. post-viral) or accident   
  Other physical disability   
  Speech, language and communication needs  
 Other medical condition (e.g. epilepsy, asthma, diabetes), please state:    
  Other specific learning difficulty (e.g. dyspraxia), please state:   
 Other learning difficulty   
  Other disability   
  Prefer not to say

I may need help with reading, writing, maths or coursework Yes

Have you ever been granted exam concessions in the past? Yes

Have you ever been given support with exams? Yes

Have you ever received free school meals? Yes

Do you have a household income of under £22,000 and intend to apply for financial support? Yes

Are you living in the care of social services? Yes

Are you a care leaver? Yes

Are you a young carer? Yes

Are you aged 19+, applying for an eligible course and intend to apply for or require information about Advanced Learning Loans? Yes

\*Do you have any spent or unspent criminal convictions, any outstanding court proceedings or are you on any offenders register? Yes (1)  No (2)

*\*If you declare that you have a conviction, you will be contacted for further information. This information will help us assess any potential risks to yourself or others at the College. Having a criminal record will not necessarily prevent you studying at College but this will depend on the nature of the course and the circumstances of the offence. If you do not disclose a conviction, then this can result in disciplinary action or being asked to leave the College.*

### 5. Declaration and Data Protection

Please complete

Data Protection Act 2018 and GDPR

SGS College takes its responsibilities as a data controller very seriously and is wholly committed to only using the personal data we hold for legitimate educational purposes and to keep you informed, in accordance with the law. The College's privacy notice is intended to provide information about how we collect, process and store your personal data. It also explains how we might share your data with third parties and explains your rights in relation to how we use your data. Please read it carefully at [www.sgscol.ac.uk/privacystatement](http://www.sgscol.ac.uk/privacystatement). If you have questions regarding your personal data or its use,

please contact us. We would like to send you targeted information about future courses and services, which may be of interest to you. To opt in to receive these marketing communications, please tick the box:

So SGS College can effectively manage these communications, please confirm how you wish to be contacted (you can choose more than one option):  
 Telephone   
 Email   
 Post   
 SMS (text message)

Please return the completed form to:

**Admissions, SGS College, Stroud Campus, Stratford Road, Stroud, GL5 4AH**

Where/how did you find out about SGS College and your chosen course(s)?

If you wish to become a member of the SGS Alumni Network, please tick here:

Signature

Date

If under 18, parent/guardian signature



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# APPLICATION FORM SGS SPORT

If you are applying for an SGS Sport Academy, in ADDITION to completing the standard application form, please provide the information below:

## Section 1. Personal Details

Title

First Name(s)

Family Name

Address

Postcode

Tel.

Email

Date of Birth

## Section 2. Academy Application

<input type="checkbox"/> American Football (male)	<input type="checkbox"/> Athletics
<input type="checkbox"/> Basketball Academy (male)	<input type="checkbox"/> Cricket Academy
<input type="checkbox"/> Boxing Academy	<input type="checkbox"/> Football Academy (female)
<input type="checkbox"/> Football Academy (male)	<input type="checkbox"/> Netball Academy (female)
<input type="checkbox"/> Golf Academy	<input type="checkbox"/> Table Tennis Academy
<input type="checkbox"/> Rugby Union Academy (male)	<input type="checkbox"/> TEAMS
<input type="checkbox"/> Rugby Union Academy (female)	

Please tick which campus you would like to study at:

WISE       Stroud

Please give a brief history of your playing career so far (plus handicap if applying for the Golf Academy):

Please state any medical conditions or previous major injuries:

Please outline why you would like to join the Academy:

Please provide the name, address and telephone number of one person that we can contact to discuss your ability; for example, a previous teacher, coach or pro in your sport:

Signature

Main course applied for:

Date:

Entry year:

**You must apply and be accepted for a main course of study to apply for the Academy.**

**Please do not hesitate to contact Admissions if you require any further information or help with completing this form.**

**Please return the completed form to:**

**Admissions,  
SGS College, Stroud Campus,  
Stratford Road, Stroud, GL5 4AH**

**01453 761165 and 01453 761225  
admissions@sgscol.ac.uk  
www.sgscol.ac.uk**