

# APPLICATION FORM FOR PASCALS COLLEGE

## *Personal Details*

Title:

Family Name:

Forename(s):

Gender: (tick the appropriate option)

Male

Female

Date of Birth:  (DD/MM/YYYY)

Nationality:

Permanent Home Address:

Telephone Number:

Mobile Number:

Email:

Address for correspondence  
(mailing address):

**Qualifications Obtained/Pending:**

Subject	Level	Board	Result	Date Obtained

**Course Choice**

Please indicate which course you are applying for:

GCSE

AS Level

A2 Level

Skills Based

GNVQ

IT/Computing/Science Courses

Other \_\_\_\_\_ (please specify)

**Subjects you wish to undertake at Pascals College:**

Subject	Level	Board

**Duration of Course**

1 Term

1 Year

18 Months

2 Years

**GENERAL INFORMATION**

**How did you first learn about Pascals College?**

Exhibition/Seminar

Newspaper Advertisement

Recommendation by a friend or relative

Recommendation by an Education Agent

**Please specify the semester in which you wish to begin your studies:**

September

January

April

June

**Do you want Pascals College to arrange accommodation for you?**

Yes

No

**Do you require airport pick-up?**

Yes

No

**In accordance with UK law you are required to state whether you have any criminal convictions.**

**Do you have any criminal convictions?**

Yes  \_\_\_\_\_  
(Please specify)

No

**Applicant's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(if applicant is under 18 years of age)