

# ENROLMENT FORM

Please complete all of this \*form using **BLOCK CAPITALS**, OR tick one or more boxes where applicable. All information provided is Strictly Confidential, and may be held on a database in accordance with the Data protection Act 1988. Enrolment onto your chosen course will be subject to an initial advice & guidance interview / initial assessment with staff/authorised representatives of the College.\*Failure to complete this form in full will result in your application being returned to you and delays in the enrolment process.

**PASSPORT SIZE  
PHOTOGRAPH**

## 1. Personal Details:

**ALL STUDENTS**

Title (Mr, Mrs, Ms, etc):  Surname/Family Name:  First Names:   
 Date of Birth:    Country of Birth:  Nationality:   
 Email:  Tel:  Mob:

### Home Address

House No.  Address:

County/State:

Postcode:

### Correspondence Address (If different from "Home Address")

House No.  Address:

County/State:

Postcode:

## 2. Course:

**ALL STUDENTS**

Course Name:

Course Code:

Course Level:

Start Date (dd/mm/yyyy):

**3. Educational Qualifications:****ALL STUDENTS**

Please attach the relevant attested photocopies of your educational qualifications.

Year	Examining Board	Qualifications	Core Subject	Results or Credits

**4. Other Training / Short Courses Completed:****ALL STUDENTS**

Date	Training/Course	Institute	Address	Award Achieved

**5. Employment History:****ALL STUDENTS**

Name and Address of Employer	Your Position/Designation	Date	
		From	To

## 6. Support Requirements:

ALL STUDENTS

- a) Do you consider yourself to have a physical disability? Yes  No
- b) Do you have any difficulty with Numeracy? Yes  No
- c) Do you have any difficulty with Literacy? Yes  No

## 7. Employment/ Benefit Information

LOCAL STUDENTS

- a) Are you currently employed? Yes  No
- b) Are you in receipt of Benefits? Yes  No   
(JSA / Income Support / Working Tax Credit / Housing Benefit / Council Tax Benefit) (PLEASE CIRCLE AS APPROPRIATE)
- c) National Insurance Number:             
(e.g. A B 1 2 3 4 5 6 X )

(If you wish to claim a fee waiver, we must see satisfactory benefits evidence before you enrol. Please note if in receipt of JSA this must be a letter dated within the last two months. If you do not have this please ask us for a 'Proof Of Benefits' form.)

## 8. Convictions LOCAL STUDENTS

I have a previous conviction, or a pending conviction, for a violent or sexual offence  (Tick if applicable)

Applicants with previous convictions will be subject to a fair assessment process. If you have any queries please contact City College Nottingham's student services on 0115 9101455 or contact [info@ccn.ac](mailto:info@ccn.ac)

## 9. Learning Agreement

LOCAL STUDENTS

- a) I agree to abide by College terms and conditions for the payment of fees and understand that I am liable for the payment of all fees owing in line with the College's fee policy (further details are included on the back of your receipt).
- b) I agree to let the College know of any change in personal circumstances including home address and contact details
- c) I agree to let the College know of any change in personal circumstances including home address and contact details.
- d) I agree to attend all timetabled classes regularly and on time (including tutorials and Functional Skills where appropriate) and to let my tutor or Retention and Achievement Officer know if I am unable to attend a class for any reason.
- e) I agree to take part in support for my learning, if I need it, and to this in consultation with my teachers and tutor.
- f) I agree to complete assignments and other work on time and to inform tutors of any reason why I may not be able to complete assignment work
- g) I understand that by signing this learning agreement I agree to take part in any assessment or examination process associated with the course.
- h) I confirm that all details on this form, including qualifications on entry are accurate and complete to the best of my knowledge.

From time to time the College may need to share information about your performance with your parent(s)/guardian(s)/carer(s) in the interests of your educational progress (applies to students under 18 years of age).

City College Nottingham reserves the right to exclude or refuse to enrol a student for academic or disciplinary reasons

I agree to City College Nottingham processing the information that is contained on this enrolment form and any additional data which may be obtained by City College Nottingham from me or other people, for reasons connected with my studies. For other users of personal information, the College would seek consent from me directly.

Learners are advised that City College Nottingham provides courses for 14-16 year olds and other vulnerable learners. If you have any queries, contact the College reception.

Applicant Signature

Date

**10. Statement of Purpose (By Applicant):**

**ALL STUDENTS**

(State your reasons for applying and why you feel you should be accepted on the course etc)

Applicant Signature: