

Direct Entry Application Form

Thank you for your interest in studying at the University of Winchester. Please email your completed form and any additional sheets to admissions@winchester.ac.uk or print out and post to Course Enquiries and Applications, University of Winchester, Sparkford Road, Winchester, Hampshire SO22 4NR

1 PERSONAL DETAILSA

TITLEA	FIRST NAME(S)A		SURNAMEA		
GENDERA	PREVIOUS SURNAME (if applicable)		DATE OF BIRTH (DD/MM/YY)		
PROGRAMME OF STUDYA	given in the University prospectus or on the website)				
Do you wish to stuc	ly the programme full-time 🔘 or part-tim	ne 🔾			
Start date (YY/MM)					
Programme deliver	y, attendance on campus at the University	orv	via distance learning*		
*please note this o	ption is only available if specified on our	website			
Have you previousl	y studied or are currently studying at the U	Iniversity	of Winchester? Yes No		
If yes please provid	e your student number				
CONTACTADDRESS (all write	ten communication will be sent to this)	ERMANENT	/HOME ADDRESS (if different from contact address)		
AGENTS ADDRESS (if application)	able)				
If possible, both a la	andline and mobile number should be supp	plied (if c	outside the UK, please include the international		
dialling code) .		'	·		
LANDLINEA	м	OBILEA			
Email (please note in	mportant information relating to your applicat	tion will b	e sent to you by email. Please ensure that your email		
address can be easily read and that your email account will accept email sent from addresses ending @winchester.ac.uk).					
EMAIL A DDRESSA					

2 EDUCATIONA

Please give full details of academic qualifications you have obtained or are expecting to obtain before the beginning of the programme you are applying for. If you have a non-UK qualification, please state the full original title of the course in English and provide an officially translated copy.

If you have not yet obtained the qualification, please give a summary of marks achieved so far and result expected.

Secondary/High School e.g. GCSEs, O Level etc.

QUALIFICATIONA	SUBJECTA	GRADEA	DATE OBTAINED (MM/YY)	NAME OF SCHOOL/COLLEGE/INSTITUTIONA

Further Education e.g. A Levels, HND, Access, BTEC etc.

QUALIFICATIONA	SUBJECTA	GRADEA	CLASSIFICATIONA	A DATE OBTAINED (MM/YY)	NAME OF SCHOOL/COLLEGE/INSTITUTIONA

University/Higher Education e.g. BA, BSc, MA, MSc, MPhil etc

QUALIFICATIONA	SUBJECTA	GRADEA	CLASSIFICATIONA	A DATE OBTAINED (MM/YY)	NAME OF SCHOOL/COLLEGE/INSTITUTIONA
	kills /Qualifications /Mambarshi				

Additional Skills/Qualifications/Membership of Professional Bodies

QUALIFICATIONA	SUBJECTA	GRADEA	DATE OBTAINED (MM/YY)	NAME OF SCHOOL/COLLEGE/INSTITUTIONA

Recognition of Prior Learning (RPL)

Noodymile in the Leanning (in L)
If you want to claim exemption from modules, please list below the courses or prior experience you wish to be taken into consideration.

3 ENGLISH LANGUAGE QUALIFICATIONSA If English is not your first language and you have taken an English language examination, please give details. If you have been taught in English please specify the level and duration of study. TITLEA DATEA **OVERALLAND COMPONENT SCORES** (please include IELTS Test Report Form Number if known) **4 EMPLOYMENT DETAILSA** NAME AND ADDRESS OF CURRENT AND MOST RECENT EMPLOYER(S)A POSITION HELD (duties/responsibilities) DATES FROM/TOA 5 PERSONAL STATEMENT - ALLAPPLICANTSA Please state why you wish to follow your chosen programme and how it relates to your previous experience. If you are applying for MA Writing for Children or MA Critical and Creative Writing, please also provide a sample of your writing e.g. a chapter of a novel, a short story, or a sample of poetry. f you are applying for MA Digital Media Practice please include a portfolio of work with your application or include a link to where your work is published.

6 REFERENCEA Please note that we are asking for your referee's details for information only - you will need to contact your referee yourself, and ask them to provide a reference to us directly. NAMEA ADDRESSA POSITIONA **7 FEE STATUSA** To assist us in assessing your fee status, please provide the following information (we will contact you if we require any further information): COUNTRY OF BIRTH (IF UK, PLEASE SPECIFY ENGLAND, SCOTLAND, WALES OR NORTHERN IRELAND)NATIONALITY (AS STATED ON YOUR PASSPORT)A Do you have dual nationality? Yes No If yes, please enter your second nationality: DATE OF FIRST ENTRY TO LIVE IN THE UKA not born in the UK) IN WHICH COUNTRY ARE YOU CURRENTLY LIVING? A If you are not a UK national, please provide details of any previous study in the UK (start date, end date, level of study, location) - please continue on a separate sheet if necessary. **8 PAYMENT OF TUITION FEESA** Please tell us how you are planning to fund your tuition fees and living expenses for the duration of your study by indicating which of the following sources you expect will provide the majority of your funds. My own means My family My employer Student finance Other (please specify O

If you are applying for a scholarship to cover the cost of tuition, please indicate if you have::

Already received confirmation of the award Applied and are a waiting the decision Intend to apply

9 DISABILITIESA

Black or Black British - African

The University of Winchester welcomes applications from students with disabilities and considers them on the same academic grounds as those from other students. It is helpful for us to know about the nature of any disability in order to ascertain whether facilities are available at the University to meet students' special needs. Applicants with disabilities are encouraged to contact the Disability Adviser at disability@winchester.ac.uk prior to applying.

Do you have a disability? Yes No

Do you have a disability? Yes No								
Please tick the box(es) which apply to you:								
I am blind or have a serious visual impairment uncorrected by glasses								
I am deaf or have a serious hearing impairment								
I have a long standing illness or healt	I have a long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease or epilepsy							
I have a mental health condition, suc	I have a mental health condition, such as depression, schizophrenia or anxiety disorder							
I have a physical impairment or mobi	lity issues, such as difficulty using arms o	or using a wheelchair or crutches						
I have a social/communication impa	irment such as Asperger's syndrome/oth	er autistic spectrum disorder						
I have a specific learning difficulty, su	nch as dyslexia, dyspraxia or AD(H)D							
I have two or more impairments and	or disabling medical conditions (please :	specify)						
I have a disability, impairment or med	dical condition not listed above (please sp	pecify)						
10. EQUAL OPPORTUNITIES MONITOR								
All persons of the requisite standard, whether resident in the UK or elsewhere, shall be eligible for admission into the University. No disadvantage shall be imposed on any candidate for admission as a student of the University on the grounds of ethnic origin, religion, gender, or sexual orientation.								
So that we can make our equal opportu	nities policy effective, please tick the butt	on which is appropriate to you:						
Asian or Asian British – Bangladeshi	Black or Black British - Caribbean	Mixed - White & Black Caribbean						
Asian or Asian British – Indian	Other Black background	Other Mixed background						
Asian or Asian British – Pakistani	Chinese	White						
Other Asian background	Gypsy or Traveller	Other Ethnic background						
Arab	Mixed - White & Asian	O Information refused						

Mixed - White & Black African

Have you been in care? Yes No
Please tick this box if you have spent time living in public care as a looked after child, including:
•Ain local authority care and living with foster carers, or in a children's home
•Abeing 'looked after' at home under a home supervision order in Scotland
This does not refer to time spent in boarding schools, working in a care or healthcare setting, or if you are or have been a carer yourself. There is a separate question for learners that have caring responsibility.
If you select 'yes', your information will be treated in confidence, to help us provide support for you and may also be used for monitoring purposes, which try to inform and improve support for students who have been looked after or in care.
Do you have any caring responsibilities? Yes No
Please tick this box if you are responsible for providing unpaid care for someone who has, for example, an illness, disability, mental health condition or addiction.
If you select 'yes', your information will be treated in confidence, to help us provide support for you and may also be used for monitoring purposes, which try to inform and improve support for students who have care responsibilities.
11 HOW DID YOU FIND OUT ABOUT THE UNIVERSITY? A
The University of Winchester prospectus
The University of Winchester website
My university careers adviser/lecturer
Recommendation by a friend/colleague
The British Council
Elsewhere on the internet (please specify)
A directory of programmes (please state the title)
A postgraduate fair or event (please state which event)
An advertisement (please state which newspaper/journal)
Other (please specify)

12 DATA PROTECTION ACT 1998 AND DECLARATIONA

and passport number) and copies of your qualifications.

UNDER THE GENERAL DATA PROTECTION REGULATION (GDPR) FROM 25 MAY 2018A

The data collected on this form will be used for the purposes of administering an application to the University of Winchester. It will also be used for educational administration if you subsequently become a student of the University. The records created with regard to this data are subject to regulation by The General Data Protection Regulation (GDPR) from 25 May 2018.

from 25 May 2018.	
The information contained in our records may be used for reporting, both internally within the U bodies, who may include grant, loan or sponsor administrators and the Student Union. In submare confirming your agreement and awareness of your data being processed in line with this denotice ('fair processing' notice) more generally.	itting your application, you
I confirm that, to the best of my knowledge and belief, the information given on this form is accurate, and that no information requested or other relevant information has been omitted offer of a place at the University of Winchester is made on the basis of the information given	l. I understand that any
SIGNATURE (please sign or type your full name)	DATEA
13. CHECKLISTA	
Please make sure that you include the following:	
Application form (all relevant sections completed and the declaration signed and dated)	
One reference in support of your application or have contacted your referee to provide a ref admissions@winchester.ac.uk	erence directly to
If English is not your first language and you have taken an English language examination: A cresult certificate or IELTS Test Report Form Number	certified copy of the test
If your work experience will enhance your application please enclose a CV	
If you require a visa to study in the UK please include a copy of your passport (pages showing	ng nationality full name

Please return your completed form, reference/s and any additional sheets to: admissions@winchester.ac.uk or post to Course Enquiries and Applications, University of Winchester, Sparkford Road, Winchester, Hampshire SO22 4NR.