

PATHWAYS SHORT COURSE APPLICATION

(You may use a photocopy of this form)



Where did you hear about the College? Community Centre / Friend / Leaflet / Other (please specify)

COURSE DETAILS

Which course(s) are you applying for?

Course title: Course Date:

Course title: Course Date:

PERSONAL DETAILS

Last name: First name(s):

Title: Mr/Mrs/Miss/Ms Gender: Male/Female Date of Birth: (you must be over 20)

Home Address:

..... Postcode: Home Telephone No: Mobile No:

Emergency Contact: Contact Telephone No:

Home Local Education Authority: (i.e. To which authority do you pay your Council Tax?)

Do you consider yourself to be disabled? **YES/NO**

Please give details of any disability or serious medical condition:

Do you have any special dietary needs? **YES/NO**

For example: Vegetarian / Vegan / Fat free / Gluten free / Halal / Other (please specify)

If you are employed what is the name of your employer:

ETHNIC ORIGIN

Asian or Asian British - Bangladeshi	Mixed - White and Black African	
Asian or Asian British - Indian	Mixed - White and Black Caribbean	
Asian or Asian British - Pakistani	Mixed - any other mixed background	
Asian or Asian British - any other Asian background	White - British	
Black or Black British - African	White - Irish	
Black or Black British - Caribbean	White - any other White background	
Black or Black British - any other Black background	Any other	
Chinese	Please state:	
Mixed - White and Asian	Not known/Prefer not to say	

Are there any restrictions on the period of time you can stay in the UK? **YES/NO** If **YES** please give details

ACCOMMODATION DETAILS

Are you staying overnight at the College? **YES/NO** Are you bringing a carer? **YES/NO**

If yes Carer's Last name: First name(s):

Unfortunately ground floor accommodation cannot be guaranteed. If you think you have a case for ground floor accommodation please send a copy of your Disability Living Allowance Certificate, Attendance Allowance Certificate or a medical note.

PLEASE BE AWARE THAT WE HAVE VERY FEW SINGLE ROOMS SO MOST PEOPLE WILL HAVE TO SHARE ACCOMMODATION.

If at all possible please agree with someone else who is attending the course to share rooms with them and write their name here:

ACCOMMODATION DETAILS Continued

CHILDREN

If you are bringing children to the College with you, please give their details here:

Last Name	First Name(s)	Gender	Date of Birth
.....
.....
.....

Please give details of any disability, registered or unregistered, or medical condition, of which you think the Children's Centre should be made aware:

What is your highest educational qualification? (if any)
 N.B. Northern College free courses are primarily for people with few or no qualifications and these applicants will be prioritised

YOUR LEARNING NEEDS

Please spend a few minutes completing this section. It will help us to make sure that this is the right course for you.

Do you have any difficulties with learning (e.g. reading, writing, maths)? **YES/NO**

If YES, please give details:

What do you hope to get out of this/these course(s)? What are your main reasons for applying to come?

Please continue on a separate sheet if necessary

"I understand that the information I have given will be processed by the College in compliance with the 1998 Data Protection Act. I give my consent to the Northern College to record and process information regarding any health conditions which I have declared."

Signed: Date:

The information you provide may be used by the College for marketing activities - if you do not wish it to be used for such purposes please tick here

Please return to: The Registry, Northern College, Wentworth Castle, Stainborough, BARNSELY, South Yorkshire. S75 3ET Telephone: 01226 776010 Fax: 01226 776025 E-mail: registry@northern.ac.uk