

4. Previous academic qualifications (including any pending qualifications)

Title	Awarding Body	Date Awarded	Grade/Division

5. Employment

Organisation	Position held	From	To

6. Proficiency in English Language (You may tick more than one if applicable)

Test	Yes ?	Score	Other Evidence	Yes ?
IELTS	<input type="checkbox"/>	<input type="text"/>	Studied in English medium	<input type="checkbox"/>
Pearson Test	<input type="checkbox"/>	<input type="text"/>	Studied in the UK (English Medium)	<input type="checkbox"/>
TOEFL	<input type="checkbox"/>	<input type="text"/>	Other (Please mention) <input type="text"/>	<input type="checkbox"/>

7. Study Plan and Intention :

Assessment of your intention to pursue your chosen course :

	Yes	No
Do you wish to pursue your career using the course you have selected ?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have any relevant qualification(s) or experience(s) that may assist you in successfully completing your chosen course ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you considered any career options available to you after your study ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you previously completed a similar course at the same level ?	<input type="checkbox"/>	<input type="checkbox"/>
Other statement (if any) <input type="text"/>		

Answer the following questions that will help us to assess whether you have made an informed decision about the course selection :

	Yes	No
Have you read the specification of the course you have selected ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you seen the module/unit/subject content of the course ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you sought any guidance from anyone who has done or doing a similar course ?	<input type="checkbox"/>	<input type="checkbox"/>
Are you aware of the assessments involved in the course ?	<input type="checkbox"/>	<input type="checkbox"/>
Other statement (if any) <input type="text"/>		

Answer the following questions that will help us to assess the rationale of your decision to select London Churchill College :

	Yes	No
Have you visited our website and/or read our prospectus ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you been recommended by anyone who has or had link with the college ?	<input type="checkbox"/>	<input type="checkbox"/>
Have you visited websites and/or read their prospectuses of any other Institutions in the UK ?	<input type="checkbox"/>	<input type="checkbox"/>
Are you aware of the facilities provided by the college ?	<input type="checkbox"/>	<input type="checkbox"/>
Are you aware of the terms and conditions of the college ?	<input type="checkbox"/>	<input type="checkbox"/>
Other statement (if any)	<input type="text"/>	

8. Financial Capability :

	Yes	No
Have you secured funding to cover your fees and cost of living in the UK for the entire duration of your course ?	<input type="checkbox"/>	<input type="checkbox"/>
Are you planning to cover part/full amount of your cost of living by working Part-time while studying ?	<input type="checkbox"/>	<input type="checkbox"/>
Other statement (if any)	<input type="text"/>	

9. Referees

Name	<input type="text"/>	Name	<input type="text"/>
Address	<input type="text"/>	Address	<input type="text"/>
Position Held	<input type="text"/>	Position Held	<input type="text"/>
Tel Number	<input type="text"/>	Tel Number	<input type="text"/>
Fax Number	<input type="text"/>	Fax Number	<input type="text"/>
E-mail	<input type="text"/>	E-mail	<input type="text"/>

10. Marketing Information : How did you come to know about London Churchill College ?

<input type="checkbox"/>	Overseas Representative/Agent (Please specify) :	<input type="text"/>
<input type="checkbox"/>	Advertisement (Please specify)	<input type="text"/>
<input type="checkbox"/>	Current / Ex-student (please specify) :	<input type="text"/>
<input type="checkbox"/>	Other source (Please specify) :	<input type="text"/>

II. Document Enclosure and Checklist :

Documents	YES	Documents	YES
Passport Copy	<input type="checkbox"/>	2 Photographs	<input type="checkbox"/>
Visa Copy	<input type="checkbox"/>	Copies of Certificates	<input type="checkbox"/>
Reference Letter from Previous Institution	<input type="checkbox"/>	Copies of Transcripts/Mark-sheets	<input type="checkbox"/>
English Language Test Score	<input type="checkbox"/>	Registration Document with awarding body (if External Programme)	<input type="checkbox"/>

I Confirm that the Information in this form is Correct and Factual to the best of my knowledge . I am responsible to keep abreast of the Terms and Conditions and the College policies and agree to abide by them. I've read the College's "Terms and Conditions" and other Legal Policies and agree to follow them during my entire course of study.

Signature

Date :

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Name in Full (in BLOCK LETTERS) :

Please send a Completed Application Form to the following address :

The Admission Office, London Churchill College, 116 Cavell St. London, E1 2JA, UK

Phone : +44 (0) 207 377 1077 Fax : + 44(0) 207 247 9007

E-mail : admission@londonchurchillcollege.co.uk Web : www.londonchurchillcollege.co.uk

Office use only

CAS Number			
Date Received		Student Number	
Decision	<input type="checkbox"/> Unconditional	<input type="checkbox"/> Conditional	<input type="checkbox"/> Reject
Programme of Study			
Start Date :		End Date :	
Course Fees		Amount Paid :	
Authorised Signature			