

APPLICATION FORM

For office use only

First choice course code _____

Second choice course code _____

Date entered _____

Signature _____

Please complete this form using blue or black ink and return:

Information, Advice & Guidance Team

Bridgwater & Taunton College, Bath Road, Bridgwater, Somerset TA6 4PZ

Legal Name Preferred Name

Date of birth Legal Gender Male Female Preferred Gender Male Female Non binary

Address

Postcode

Home tel Mobile tel

Name of current or previous school or college and year of leaving

When you have made your application, we would like to contact you by email. Please enter your email address and check your emails on a regular basis.

Personal email

School email

Nationality

Is English your first language? Yes No

Have you been a resident in the EEA for the last three years, not solely for study purpose? Yes No

If no, please enter the date you entered the EEA

COURSE DETAILS

Which course(s)/apprenticeship are you applying for? Please refer to the prospectus for title.

If your first choice is an Apprenticeship, please apply for a full-time study programme as your second choice.

1st choice

2nd choice

If you are applying for A Levels or the International Baccalaureate Diploma (IB), please state the subjects you are interested in.

1 2 3 4 (IB only)

If applying for an Apprenticeship, have you found an employer? Yes No

If yes, what is the company or your employer's name?

Please briefly tell us why you have chosen this course(s)/Apprenticeship.

Where would you like to study?

Bridgwater campus

Taunton campus

Cannington campus

Are you currently a full-time student at Bridgwater & Taunton College? Yes No

If still at school, are you currently attending a programme at College? Yes No

WHO DO YOU LIVE WITH?

Please tick the relevant box

Mother and/or father I live on my own Another adult (ie. foster carer, older sister/brother)

Parents'/guardians'/carers'/next of kin's name(s)

Name

Address (if different from previous)

Postcode

Tel Email

Name

Address (if different from above)

Postcode

Tel Email

ADDITIONAL SUPPORT

Do you need additional support with your studies? Yes No

To help the College provide the best support for you, please tick the boxes below if you consider yourself to have any of the following:

- | | | |
|---|---|---|
| <input type="checkbox"/> Autism Spectrum Disorder | <input type="checkbox"/> Visual impairment | <input type="checkbox"/> Hearing impairment |
| <input type="checkbox"/> Asperger's Syndrome | <input type="checkbox"/> Profound/complex disabilities | <input type="checkbox"/> Emotional/behavioural difficulties |
| <input type="checkbox"/> Severe learning difficulty | <input type="checkbox"/> Dyslexia | <input type="checkbox"/> Dyscalculia |
| <input type="checkbox"/> Dyspraxia | <input type="checkbox"/> ADHD/ADD | <input type="checkbox"/> Mental health difficulty |
| <input type="checkbox"/> Multiple learning difficulties | <input type="checkbox"/> Mobility difficulty | <input type="checkbox"/> Anxiety issues |
| <input type="checkbox"/> Temporary disability (eg illness/accident) | <input type="checkbox"/> Physical condition (eg epilepsy, asthma) | <input type="checkbox"/> Moderate learning difficulty |
| <input type="checkbox"/> Multiple disabilities | Other <input type="text"/> | |

ETHNIC ORIGIN

- | | | |
|--|---|--|
| White | Asian/Asian British | Mixed/Multiple Ethnic Group |
| <input type="checkbox"/> British (English/Welsh/Scottish/Northern Irish) | <input type="checkbox"/> Indian | <input type="checkbox"/> White and Black Caribbean |
| <input type="checkbox"/> Irish | <input type="checkbox"/> Pakistani | <input type="checkbox"/> White and Black African |
| <input type="checkbox"/> Gypsy or Irish Traveller | <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> White and Asian |
| <input type="checkbox"/> Any other White background | <input type="checkbox"/> Chinese | <input type="checkbox"/> Any other mixed/multiple ethnic black |
| | <input type="checkbox"/> Any other Asian background | |
| Black/African/Caribbean/Black British | Other Ethnic Groups | |
| <input type="checkbox"/> African | <input type="checkbox"/> Arab | |
| <input type="checkbox"/> Caribbean | <input type="checkbox"/> Any other ethnic groups | |
| <input type="checkbox"/> Any other Black/African/Caribbean Black | | |

CONTACT PERMISSION

We would like to send you information about other courses, special offers, events and the latest information from Bridgwater & Taunton College by email, post, SMS, phone and other electronic means. We will always treat your personal details with the utmost care and will never sell them to other companies for marketing purposes.

Please let us know if you would like us to contact you or not by selecting one of the following options:

Yes please, I'd love to hear from you. No thanks, I don't want to hear about offers and services

PRIVACY NOTICE

If you are aged under 19, the information you provide may be shared with your Parents/Carers, current School and the Careers Service, during and after the application process. Some of the information you supply will be used by the Skills Funding Agency to fulfil its statutory functions, issue/verify your Unique Learner Number (ULN) and update/check your Personal Learning Record. The Skills Funding Agency may share your ULN and Personal Learning Record with other education related organisations such as your careers service, school, college, university, Government Departments and public bodies responsible for funding your education. Further details of how your information is processed and shared is available on the following website:

www.gov.uk/government/publications/learning-records-service-the-plr-for-learners-and-parents

PLEASE RETURN THIS FORM

Information and Guidance
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& TAUNTON
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