

Application for Admission

1. CHOICE OF COURSE (Please use block capitals and tick where appropriate)

Please indicate the course you wish to apply for:

1st Choice: _____

2nd Choice: _____

3rd Choice: _____

Preferred mode of attendance: Full-time Part-time Evening Day Release

Have you previously been a student at any of the following campuses: Ayr Campus Kilmarnock Campus Kilwinning Campus

If yes, please provide details of your most recent course(s) and dates of attendance:

Course	Date

Disclosure Scotland

Applicants should be aware that legislation requires that a Disclosure Scotland Application to join the PVG Scheme Form is completed where a course requires placement/work placement with children, young people and adults at risk of harm.

2. PERSONAL DETAILS (Please tick all boxes that apply)

Title: Mr Miss Mrs Ms Other – Please specify: _____

Surname _____ Forename(s) _____

Date of Birth _____ Age _____ Gender: Male Female Other

Permanent Home Address:

Address for correspondence:

Post code _____ Post code _____

Email _____ Telephone No. _____

Mobile _____

Have you been resident in Scotland for at least one year? Yes No

Have you been resident in the UK for the last three years? Yes No

Is English your first language? Yes No

Ethnic Origin

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> 10 Scottish White | <input type="checkbox"/> 16 Indian | <input type="checkbox"/> 21 Caribbean | <input type="checkbox"/> 32 Gypsy/Traveller |
| <input type="checkbox"/> 11 English White | <input type="checkbox"/> 17 Pakistani Asian | <input type="checkbox"/> 22 African Black | <input type="checkbox"/> 33 Polish |
| <input type="checkbox"/> 12 Welsh White | <input type="checkbox"/> 18 Bangladeshi Asian | <input type="checkbox"/> 23 Any other Black, Black Scottish or Black British | <input type="checkbox"/> 34 Arab |
| <input type="checkbox"/> 13 Irish White | <input type="checkbox"/> 19 Chinese | <input type="checkbox"/> 30 Northern Irish | <input type="checkbox"/> 24 Other Ethnic Background |
| <input type="checkbox"/> 14 Other White | <input type="checkbox"/> 20 Any other Asian, Asian Scottish or Asian British | <input type="checkbox"/> 31 British | <input type="checkbox"/> 98 Prefer not to say |
| <input type="checkbox"/> 15 Other Mixed | | | <input type="checkbox"/> 99 Information not known |

Next of Kin/Emergency contact

Surname _____ Forename(s) _____

Address _____

Postcode _____

Telephone Number _____ Relationship _____

Source of Finance

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> 01 Student Award Agency Scotland (SAAS) – HNC/D | <input type="checkbox"/> 05 Skills Development Scotland | <input type="checkbox"/> 14 Self Financing (home rate, includes EU) | <input type="checkbox"/> 17 ILA |
| | | | <input type="checkbox"/> 36 Self Financing (full rate) |

3. Education/Qualifications

Scottish Candidate Number: _____

Applicant should list all subjects whatever the result in date order. If you are awaiting the results of any examinations write PENDING in the results column. (Please continue on a separate sheet if necessary.)

Subject	Level	Date	Place of Study	Results

Further information to support your application

Please use this space to give details of your most recent work, work experience and/or placements which relate to your application.

Employer's Name and Address	From	To	Job Title

Any other relevant information to support your application

4. Marketing Information

How did you find out about the course for which you are applying? (Please tick)

- | | | | |
|-------------------------------------|--|--|---|
| <input type="checkbox"/> Bus Advert | <input type="checkbox"/> College Reception Enquiry | <input type="checkbox"/> Careers Event | <input type="checkbox"/> Careers Office |
| <input type="checkbox"/> Employer | <input type="checkbox"/> Friend/Relative | <input type="checkbox"/> Gateway | <input type="checkbox"/> Job Centre |
| <input type="checkbox"/> Library | <input type="checkbox"/> Press Article | <input type="checkbox"/> Press Advert | <input type="checkbox"/> Other college |
| <input type="checkbox"/> Radio | <input type="checkbox"/> School Visit | <input type="checkbox"/> Website | <input type="checkbox"/> Other |

Data Protection Act

Ayrshire College is registered under the 1998 Data Protection Act and will comply with their obligations under this Act. By signing this form you consent to Ayrshire College holding and processing your personal data for all purposes connected with the College's statutory and business requirements. Where required, your information may be supplied to other official agencies, eg the Scottish Funding Council (SFC), Higher Education Statistics Agency (HESA), the Universities and Colleges Admissions Service (UCAS) and Skills Development Scotland.

Signature of Applicant _____ Application Date _____

Your application will be acknowledged within 2 working days of being received. If you have not heard from us please telephone 0300 303 0303.

5. Additional Support

Surname _____ Forename(s) _____

Course applied for _____

Disability

Do you have a particular disability or learning support need? Yes No

If you have answered yes to the above question it is important that you give further detail by indicating the nature of your support need below:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> 30 No known disability | <input type="checkbox"/> 33 A social/communication impairment such as Asperger's syndrome/ other autistic spectrum disorder | <input type="checkbox"/> 35 A mental health condition, such as depression, schizophrenia or anxiety disorder | <input type="checkbox"/> 37 Deaf or a serious hearing impairment |
| <input type="checkbox"/> 31 Two or more impairments and/ or disabling medical conditions | <input type="checkbox"/> 34 A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy | <input type="checkbox"/> 36 A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches | <input type="checkbox"/> 38 Blind or a serious visual impairment uncorrected by glasses |
| <input type="checkbox"/> 32 A specific learning difficulty such as dyslexia, dyspraxia or AD(H)D | | | <input type="checkbox"/> 39 A disability, impairment or medical condition that is not listed above |

Do you require assistance to attend your college interview, eg sign language interpreter

Yes No Please specify: _____

Did you have learning support at school? Yes No Prefer not to say

Are you a care leaver? Yes No Prefer not to say

Caring Responsibilities

Do you have caring responsibilities? Yes No Prefer not to say

If yes, please tick all that apply:

Child/Children under 18 if disabled Adults over 18 Child/Children under 17 Prefer not to say

If you need extra support with your learning

We can meet with you confidentially to assess what support you might need in college. The Extended Learning Support Team can provide the following support:

- Discuss your requirements with you in person, by telephone or correspondence
- Arrange for you to visit the College to see the facilities and meet the relevant staff
- Offer advice about specialist assessment and access to equipment
- Offer assistance with claiming the Disabled Students' Allowance (DSA) (HNC/D courses only)
- Offer study support

In order to assist you to have a smooth transition to College life and to maximise your College experience please contact the Extended Learning Support Team as soon as possible:

Ayr Campus

Telephone: 01292 293553
Email: clic@ayrshire.ac.uk

Kilmarnock Campus

Telephone: 01563 523501 Ext 4106
Email: inclusivelearning@ayrshire.ac.uk

Kilwinning Campus

Telephone: 01294 555325
Email: coreskills_kilwinning@ayrshire.ac.uk

General Support

Ayrshire College supports all students who request additional help with their studies. Students may require support for a variety of reasons, for example returning to education after some years, study techniques, assessment and examination skills. To arrange a confidential discussion about your support needs, contact Student Services.

Ayr Campus

Telephone: 01292 293444

Email: studentservices_ayr@ayrshire.ac.uk

Kilmarnock Campus

Telephone: 01563 523501 Ext 5049

Email: studentservices_kilmarnock@ayrshire.ac.uk

Kilwinning Campus

Telephone: 0300 303 0303

Email: studentservices_kilwinning@ayrshire.ac.uk

6. Equality and Diversity Monitoring

The College has a strong commitment to equality and to ensuring that everyone is treated equally, with an ethos of mutual trust and respect. Our main objective is to work with other organisations to remove barriers and encourage further access to learning, promoting equality of opportunity. We aim to create an environment that celebrates diversity and supports individual needs. We would be grateful if you could complete the following information. This will allow us to provide evidence of our drive for equality of provision for all.

Equality and Diversity

Date of Birth _____ Age _____ Gender: Male Female

Course applied for _____

Have you ever been identified as a transgender person? Yes No Prefer not to say

Please provide any further information if you wish

Ethnic Origin

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> 10 Scottish White | <input type="checkbox"/> 16 Indian | <input type="checkbox"/> 21 Caribbean | <input type="checkbox"/> 32 Gypsy/Traveller |
| <input type="checkbox"/> 11 English White | <input type="checkbox"/> 17 Pakistani Asian | <input type="checkbox"/> 22 African Black | <input type="checkbox"/> 33 Polish |
| <input type="checkbox"/> 12 Welsh White | <input type="checkbox"/> 18 Bangladeshi Asian | <input type="checkbox"/> 23 Any other Black, Black
Scottish or Black British | <input type="checkbox"/> 34 Arab |
| <input type="checkbox"/> 13 Irish White | <input type="checkbox"/> 19 Chinese | <input type="checkbox"/> 30 Northern Irish | <input type="checkbox"/> 24 Other Ethnic Background |
| <input type="checkbox"/> 14 Other White | <input type="checkbox"/> 20 Any other Asian, Asian
Scottish or Asian British | <input type="checkbox"/> 31 British | <input type="checkbox"/> 98 Prefer not to say |
| <input type="checkbox"/> 15 Other Mixed | | | <input type="checkbox"/> 99 Information not known |

Your religion or belief

- | | | | |
|--|---|------------------------------------|--|
| <input type="checkbox"/> 01 None | <input type="checkbox"/> 04 Other Christian | <input type="checkbox"/> 07 Sikh | <input type="checkbox"/> 10 Another religion of belief
(please specify) |
| <input type="checkbox"/> 02 Christian / Protestant | <input type="checkbox"/> 05 Muslim | <input type="checkbox"/> 08 Jewish | _____ |
| <input type="checkbox"/> 03 Roman Catholic | <input type="checkbox"/> 06 Buddhist | <input type="checkbox"/> 09 Hindu | |

Your sexual orientation

- | | | | |
|---|-------------------------------------|---|--|
| <input type="checkbox"/> 01 Bisexual | <input type="checkbox"/> 02 Gay Man | <input type="checkbox"/> 03 Gay Woman / Lesbian | <input type="checkbox"/> 04 Heterosexual |
| <input type="checkbox"/> 05 Prefer not to say | | | |

Registered Address: Dam Park, Ayr, KA8 0EU

www.ayrshire.ac.uk

Ayrshire College is a charitable organisation registered in Scotland. Charity No. SC021177

