

APPLICATION FORM

SECTION A: PERSONAL DETAILS

A1. First Name(s):			
A2. Surname/Family Name:			
A3. Title: (Mr/Mrs/Ms)			
A4. Nationality:			
A5. Passport Number (if applicable):			
A6. Date Of Birth: (dd/mm/yyyy)			
A7. Country Of Birth:			
A8. Gender:	☐ Female	☐ Male	☐ Prefer not to say
A9. Home address:	First Line: Road / Street: City: County: Post Code: Country:		
A10. Contact Address (if different)	First Line: Road / Street: City: County: Post Code: Country:		
A11. Contact Number:			
A12. Email Address:			
A13. How did you hear about Watney College?			

WATNEY COLLEGE



SECTION B: QUALIFICATIONS OBTAINED

Level / Qualification	Subject(s)	Course Duration			
		Start Month/Year	End Month/Year	College/ University	Results

SECTION C: PREVIOUS STUDY IN THE UK

C1. Have you ever studied or made a visa application to study in the UK?	Yes 🗆	No 🗆
C2. Have you previously received a visa refusal to study in the UK? If yes, please attach a copy and indicate the reason for this refusal.	Yes 🗆	No 🗆
C3. Date of first entry in UK (if applicable)		

SECTION D: EMPLOYMENT INFORMATION (IF APPLICABLE)

Nature of work/training	Name of organisation	Full-time or Part-time	From (mm/yy)	To (mm/yy)

Application Form Page **2** of **3** June, 2024

WATNEY COLLEGE



SECTION E: REFEREE(S)

Referee 01		Referee 02			
Full Name		Full Name			
Address and Post code		Address and Post code			
Contact Number		Contact Number			
Email		Email			
□ Do you have any known disabilities? (Please check 'X' if yes and provide details in the box below.)					
SECTION G: DECLA	RATION				
☐ I confirm that the information given on this form is true, complete and accurate and that none of the information requested or other material information has been omitted. I accept that if it is discovered that I have supplied false, inaccurate or misleading information, WATNEY COLLEGE reserves the right to cancel my application, withdraw its offer of a place or terminate attendance at the College and I shall have no claim against WATNEY COLLEGE in relation thereto.					
SECTION H: DATA PROTECTION ACT 1988 I consent to Watney College processing my personal data for purposes related to my application, studies, health and safety, and compliance with College policies. This includes academic performance, learning support, disciplinary matters, CCTV usage, ID card photos, and data required by the Higher Education Statistics Agency (HESA) or other legitimate purposes. I consent to the disclosure of this data for academic references, further education, employment, council tax, or immigration matters, including verification with the UK Border Agency. I understand I can request a copy of my data and that details on HESA are available on the College's intranet.					
S	ignature	Date (d	d/mm/yyyy)		

Thank you for completing this form. Once completed, please return it to the following address

Watney College

80-82 Nelson Street, London, E1 2DY Email: admission@watneycollege.co.uk

Phone: +44 (0)208 004 6463

Application Form Page **3** of **3** June, 2024