UNIVERSITY OF WEST LONDON
RAK Branch Campus - UAE

Application Form

SECTION 1

If you would like additional information or help with filling in this form, please contact the Learning Advice Centre on 07 243 20 99.
Details entered onto this form will be transferred to computer. This information will be treated confidentially in accordance with the Data Protection Act, 1998.

Your choice of course (please use CAPITAL letters)

Please state which course you wish to study. _____
_____

Please indicate your proposed start date. **0 2 2 0 2 6**

Please indicate your preferred mode of study. Weekend ☐ Full-time ☐

Passport size photo

Personal Information (please use CAPITAL letters)

Title (eg Ms/Mrs/Mr/Dr) _____

First Name _____

Surname _____

Gender Male ☐ Female ☐

Date of birth D D M M Y Y Y Y

Home address _____
_____
_____ Postcode ☐☐☐☐☐☐☐

Applicant's Contact Details
(Do not provide parent's or guardian's contact details here)

Home _____ Work _____

e-mail _____ Mobile _____

Nationality _____

Country of birth _____

Country of domicile or permanent residence _____

Residence and Passport Details of Applicants

Applicants NOT who are not UAE Citizens, please state:

Sponsor/Company Name (As stated in your visa): _____

Visa/Residence Permit Start Date : D D M M Y Y Y Y

Visa/Residence Permit Expiry Date: D D M M Y Y Y Y

Date on which your student visa was issued: (if applicable) D D M M Y Y Y Y

Emirates ID Expiry Date : D D M M Y Y Y Y

Emirates ID No: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Previous education and work experience

Please list all subjects taken, whatever the result, starting with the most recent. If you are awaiting the result of any examination, please write 'pending' in the Result/grade column. You should also include any recent training and professional updating and all music grade/diploma qualifications.

Qualification Please provide details of title, level, issuing body and country	Subject(s)	Year taken	Result/grade

Wherever possible, the Universty of West London offers credit for any relevant prior learning and experience which you may have. Please indicate if you would like details of our Accreditation of Prior Learning/Experiential Learning Scheme.

Please outline any work experience you have had (both paid and unpaid) which you consider relevant to your chosen course of study.

Please include details of any special responsibilities. Continue on a separate sheet if necessary.

Job title
Name of organisation

From M M Y Y Y Y   To M M Y Y Y Y

Duties

Job title
Name of organisation

From M M Y Y Y Y   To M M Y Y Y Y

Duties

Job title
Name of organisation

From M M Y Y Y Y   To M M Y Y Y Y

Duties

Information to support your application

Please use this section of the form to provide information to support your application, including your reason(s) for wishing to take the course of study and the benefits you expect to gain from it. Please continue on a separate sheet.

References

Many of our courses, particularly those at postgraduate level, require you to provide two references. Please check whether the course you are applying for, has this as a requirement for entry.

Wherever possible, one Referee should relate to your current or recent <u>work</u> and one to any current or recent <u>study</u> you have undertaken.

Reference 1

Name

Position

Address

	Postcode						

Daytime telephone number

e-mail

Reference 2

Name

Position

Address

	Postcode						

Daytime telephone number

e-mail

Emergency contact details (Parents/Guardian)

Contact details 1

Name
Position
Address

	Post code						

Contact Number
e-mail

Contact details 2

Name
Position
Address

	Post code						

Contact Number
e-mail

Declaration

To the best of my knowledge, the information I have given on this form is correct.

Signature of applicant

Date

University of West London
RAK Branch Campus

For office use only

Admission officer's comment