

# Application form 1 of 2

You should return your application pack to your education counsellor or directly to the INTO Admissions Office at least one month before your intended start date.

Please send to: INTO Manchester Admissions, One Gloucester Place, Brighton, East Sussex, BN1 4AA, UK  
T: +44 1273 876040 | F: +44 1273 328595 | Educational counsellors: ukadmissions@into.uk.com | All other enquiries: ukes@into.uk.com

You can also apply online at [www.intohigher.com/mmu/apply](http://www.intohigher.com/mmu/apply)

Please use this code to apply scholarships : UK0118

Education counsellor's stamp

## Section 1 Student details (You must complete this section accurately otherwise your visa application may be affected)

Title (Mr/Mrs/Ms) \_\_\_\_\_

Family name \_\_\_\_\_

Other names \_\_\_\_\_

Gender  M  F Date of birth / / (dd/mm/yy) Current age \_\_\_\_\_

What type of visa do you intend to apply for?  
 Student Tier 4 visa  Student visitor visa  No visa

Name as written on passport \_\_\_\_\_

Passport number \_\_\_\_\_

Nationality / citizenship \_\_\_\_\_

Do you have or are you applying for permanent residence in the UK?  Yes  No

Are you a US citizen or a US permanent resident?  Yes  No

Do you have dual nationality status?  Yes  No

If **yes**, please provide full details \_\_\_\_\_

Permanent country of residence \_\_\_\_\_

Student's home address (you must complete this accurately as it may affect your visa application)  
\_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_

Postcode \_\_\_\_\_ Country \_\_\_\_\_

Student's telephone numbers in country of residence (inc. intl. code)  
Tel \_\_\_\_\_ Mobile telephone \_\_\_\_\_

Student's email address \_\_\_\_\_

## Section 2 Parent/Spouse/Family member and Sponsor details

Title (Mr/Mrs/Ms) \_\_\_\_\_

Family name \_\_\_\_\_

Other names \_\_\_\_\_

Relationship to student \_\_\_\_\_

Contact address \_\_\_\_\_  
\_\_\_\_\_  
City \_\_\_\_\_

Postcode \_\_\_\_\_ Country \_\_\_\_\_

Telephone (inc. intl. code) \_\_\_\_\_

Email address \_\_\_\_\_

**How do you intend to fund your studies?**  
 Self  Family  Employer\*  Sponsor\*

\*Name of employer/sponsor: \_\_\_\_\_

## Section 3 INTO course selection

### Academic programmes

#### International Foundation programme

Art and Design  Business and Humanities  Science and Engineering<sup>†</sup>

Please specify start date

Jun 2014 (4 term)  Sep 2014 (4 term)  
 Sep 2014 (3 term)  Jan 2015 (3 term)

<sup>†</sup> Only available for start dates June 2014 (4 term) or Sept 2014 (3 term).

#### Headstart International Foundation

Art and Design  Business and Humanities  Science and Engineering

Please specify start date

Aug 2014 (3 term)

#### International Diploma programme

Accounting and Finance  Business Management

Please specify start date

Jun 2014 (4 term)  Sep 2014 (4 term)  
 Sep 2014 (3 term)  Jan 2015 (3 term)

### Proposed undergraduate or postgraduate programme (Needs to be completed for visa purposes)

Do you intend to study an undergraduate or postgraduate programme after completing your INTO course(s)?  Yes  No

Proposed degree programme \_\_\_\_\_

### Graduate Diploma programme

Students applying for Graduate Diploma programmes must complete this application form and must also complete the Graduate Diploma Supplementary Information form on pages 3 and 4 in full. Any information which is missing from either form may result in delays.

Route A (Sep 2014, 3 term)  
 Route B (Jan 2015, 2 term)

Please note: Graduate Diploma applicants must submit a CV (resume) as part of their application

### English language courses

#### English for University Study

Sep 2014  Jan 2015  
 Apr 2015  Jun 2015

Start date / / End date / / (dd/mm/yy)

Please specify number of terms of English \_\_\_\_\_

## Section 4 Student's education history

Please give details of your current or most recent school, college or university. Please ensure official institution transcripts, latest available results or forecast results are attached in English.

Institution name \_\_\_\_\_

Dates of study / / to / / (dd/mm/yy) \_\_\_\_\_

Date you received (or will receive) your certificate / / (dd/mm/yy) \_\_\_\_\_

Highest educational qualification name \_\_\_\_\_

Language of instruction \_\_\_\_\_

Institution city/town \_\_\_\_\_

Postcode \_\_\_\_\_ Country \_\_\_\_\_

Email address \_\_\_\_\_

Have you ever studied in the UK?  Yes  No

If **yes**, please provide full details of study durations. Please also include a copy of your previous visa (must be completed for visa purposes).

From / / to / / (dd/mm/yy) \_\_\_\_\_

Have you ever been refused a visa for the UK?  Yes  No

## Section 5 Current English language proficiency

Please tick and enter details of your most recent English language test.  
Note: students will be assessed upon arrival and study plans WILL be altered if there is any discrepancy. Please provide a copy of your certificate.

IELTS  TOEFL  PTE  Other (please specify) \_\_\_\_\_

Have you arranged to take any other English language test(s) before starting your INTO course?  Yes  No

Name of exam \_\_\_\_\_

Date due to be taken / / (dd/mm/yy) \_\_\_\_\_

## Section 6 Welfare

Do you have any medical conditions?  Yes  No

Completion and signing of this form gives INTO permission to administer first aid by trained staff first aiders if required.

Do you consider yourself to have a disability?  Yes  No

Have you been convicted of a relevant criminal offence?  Yes  No

If you have answered **yes** to any of the above, please provide full details with your application on a separate sheet.

### Travel and medical insurance

The full cost of Uniplan insurance will be added to the invoice unless proof of alternative adequate cover is attached. For full details on insurance packages and prices see page 94 of the brochure.

Please specify what insurance package you would like  Standard  Premium

Please state when you would like the insurance to start

Start date / / (dd/mm/yy) End date / / (dd/mm/yy) \_\_\_\_\_

I have my own insurance and enclose a copy

## Section 7 Accommodation options

INTO accommodation required?  Yes  No

Please indicate the building and room type you would prefer by ticking 3 boxes below to indicate your 1st, 2nd and 3rd choice of accommodation.

Please note that INTO aims to provide the highest preference requested but, if this is not available, INTO reserves the right to provide or suggest alternative accommodation.

	1st preference:	2nd preference:	3rd preference:
Halls of residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homestay - Superior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homestay - Standard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you require homestay during the holiday periods?  Yes  No

Do you envisage that you will have any specific requirements in student accommodation as a result of a disability/medical condition?  Yes  No

### Dietary requirements

Please give details of special dietary requirements e.g. halal, vegetarian, no pork, any food allergies.

## Section 8 Airport pickup

Flight details including arrival date and flight number should be emailed to [ukarrival.details@into.uk.com](mailto:ukarrival.details@into.uk.com) as soon as possible. All under 18 students **must** either book an INTO airport pickup or provide evidence of alternative arrangements.

Do you require an airport pickup? (Manchester International Airport £40)  Yes  No

## Section 9 Declaration

I declare that the information I have supplied on and with this form is complete and correct

I have read and understood and agree to abide by the terms and conditions

I agree to abide by the Cancellation and Refund Policy

I agree to pay all tuition and accommodation and sundry expense fees as they become due

I understand that the giving of false or incomplete information may lead to the refusal of my application or cancellation of my enrolment

### Student records

I agree that copies of my academic progress and performance reports can be supplied to parents, sponsors or education counsellors without further notification  Yes  No

I agree that my records and achievements may be used for promotional purposes, without further notification  Yes  No

**Signed** \_\_\_\_\_ Date / / (dd/mm/yy) \_\_\_\_\_  
(Parent/guardian) For students under 18

**Or**

**Signed** \_\_\_\_\_ Date / / (dd/mm/yy) \_\_\_\_\_  
(Student)

## INTO Giving Support our charity

INTO Giving is our designated charity. It was established to help make a difference to the lives of young people in the developing world by improving their access to education. Each year our staff and students organise and participate in fundraising events. Before you arrive at the Centre you can support one of our educational projects by making a donation of £25. For every donation received INTO will donate a further £25 to INTO Giving. To find out more about INTO Giving please visit [www.into-giving.com](http://www.into-giving.com)

I confirm that I would like to make a donation of £25 to INTO Giving and agree for this donation to be added to my invoice / financial statement for payment

# Graduate Diploma supplementary information 1 of 2

This form is to be used by all students applying to Graduate Diploma programmes. Scanned copies of certificates, academic transcripts and syllabuses from previous study can be attached.

Please complete the form in full. Any information which is missing may result in delays.

## Section 1 Programme applied for

Programme name (including whether Part/Full-Time):

Which course do you wish to attend at Manchester Metropolitan University?

Proposed start date (month-year):

## Section 2 Personal details

Family name:

Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy)

First name(s):

Nationality:

Gender  M  F

Country of birth:

## Section 3 Your education (secondary and post-secondary)

including professional qualifications and training courses

Dates from \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy) to \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy)

Dates from \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy) to \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy)

Full name of Institution (include location and whether the award was granted or delivered by another institution e.g. SQA, EdExcel)

Full name of Institution (include location and whether the award was granted or delivered by another institution e.g. SQA, EdExcel)

Subject(s)

Subject(s)

Result (e.g. BA Hons 2.1)

Result (e.g. BA Hons 2.1)

## Section 4 Work experience

Dates from \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy) to \_\_\_\_/\_\_\_\_/\_\_\_\_ (dd/mm/yy)

Job title

Duties and responsibilities

# Graduate Diploma supplementary information 2 of 2

This is an important section and the admissions staff at NCUK will pay particular attention to what you write here. You should explain why you are applying for this programme, what you expect to achieve from it, and how it relates to your academic and career development. (See notes for guidance).

Continue on a separate sheet if necessary