

INTERNATIONAL SHORT COURSES

Application Form

Please complete this form in BLOCK CAPITALS using BLACK INK.



Cardiff Metropolitan University

Section 1: Personal Details

This section of the form provides us with important personal information.

It is compulsory for you to complete each section, giving as much detail as possible (CAPITAL LETTERS)

Title: Date of Birth: / /

Family Name(s) (as shown on passport):

Given Name(s) (as shown on passport):

Age: Nationality: 2nd (if applicable)

Male Female

Country of permanent residence:

Current address:

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Tel (include dialling codes):

Mob (include dialling codes):

Email:

Section 2: Course Details

Name of Home University:

Please choose **one** of the International Short Courses below that you wish to attend at Cardiff Metropolitan University.

- International Week
- International Summer School
- International Winter School

Please detail below which specific programme you wish to attend:

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For a full list of Cardiff Met's International Short Courses, please go to www.cardiffmet.ac.uk/international/shortcourses

Section 3: Highest Qualifications Obtained

Subject	Title of qualification as it appears on certificate	Name of Institution	Results Date	Mark/Grade

Section 4: Academic Qualifications Pending

Title of qualification	Expected date of award

Section 5: Important Information

Do you have a disability, learning difficulty, mental health issue or medical condition?

Yes No If 'Yes', please provide details of your disability/condition.

(We require this information to determine whether you would require any specific support during your studies).

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Section 6: Ethnicity

Please tick the category which best describes your ethnic group or background condition?

- | | | |
|---|---|--|
| <input type="checkbox"/> White | <input type="checkbox"/> Asian or Asian British - Pakistani | <input type="checkbox"/> White and Asian |
| <input type="checkbox"/> Gypsy or Traveller | <input type="checkbox"/> Asian or Asian British - Bangladeshi | <input type="checkbox"/> Other mixed background |
| <input type="checkbox"/> Black or Black British - Caribbean | <input type="checkbox"/> Chinese | <input type="checkbox"/> Arab |
| <input type="checkbox"/> Black or Black British - African | <input type="checkbox"/> Other Asian background | <input type="checkbox"/> Other ethnic background |
| <input type="checkbox"/> Other Black background | <input type="checkbox"/> Mixed - White and Black Caribbean | <input type="checkbox"/> Information refused |
| <input type="checkbox"/> Asian or Asian British- Indian | <input type="checkbox"/> White and Black African | |

Section 7: Declaration and Signature (Applications MUST be signed)

I confirm that the information given on this form is true, complete and accurate and no information requested or other information has been omitted. I understand that this application or any subsequent university place offered may be withdrawn by Cardiff Met if in the future the information provided proves to be inaccurate either intentionally or unintentionally.

I have read the above statements (please tick): Signature of applicant:

Print name (in Capitals): Date: / /

Where did you hear about your chosen International Short Course?

Please return this completed form to:

intshortcourse@cardiffmet.ac.uk

For details please visit our website or contact us via

Email: intshortcourse@cardiffmet.ac.uk

www.cardiffmet.ac.uk/international/shortcourses