

APPLICATION FORM

MA COLLECTIONS CARE AND CONSERVATION MANAGEMENT*

Which academic year are you applying for?		Photo
PERSONAL DETAILS		
Surname		
First Name		
Date of Birth		
Nationality	Passport Number	
Current Address		
Telephone	Mobile	
Email		
Permanent address if different from above		
Telephone	Mobile	
Email	-	

^{*}Subject to Re-validation, a process by which existing courses are periodically reviewed and re-approved by the University.

FEES
Before you commence your programme of study at West Dean College you must ensure that you hav
adequate financial provision to cover tuition and living expenses.

Please state how your fees will be funded:

Self	Amount
Awards, Scholarships, Bursaries	Amount
Bank Loans	Amount
Other	Amount

Disability Declaration Form

This form will be detached from your main application form

West Dean College welcomes applications from disabled people and will try to meet their needs wherever it reasonably can. The information that you give on this application form will help West Dean College to inform you about the support that is available at the College.

Please tick all that applies:
□ No known disability
\square A specific learning difficulty e.g. dyslexia, dyspraxia or AD(H)D
\square A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder
\square A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy
\square A mental health condition, such as depression, schizophrenia or anxiety disorder
\square A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches
☐ Deaf or a serious hearing impairment
☐ Blind or a serious visual impairment uncorrected by glasses
\square A disability, impairment or medical condition that is not listed above (please specify below)
☐ Other, please specify

If you have ticked one of the boxes that indicates you have a disability you will be contacted by a member of the Academic Registry to discuss the support you may need and any reasonable adjustments you may require.

DETAILS OF EDUCATION AND QUALIFICATIONS

Proof of academic qualifications may be required:

Proof of acade	mic qualifications may be required:		
DATE	NAME OF SCHOOL/UNIVERSITY/COLLEGE	COURSE ATTENDED	QUALIFICATION GAINED
DETAILS OF F	RELEVANT EMPLOYMENT AND EXPE	RIENCE	
DATE	OCCUPATION	NAME OF EMPLOYER	SKILLS USED
LIST OTHER (COURSES PREVIOUSLY ATTENDED (I	F ANY)	
PROFICIENCY	′ IN ENGLISH (for those whose first lan	guage is not English)	
Applicants for (Common Euro CEFR level B2 the UKVI webs College. You required level.	programmes for whom English is not the opean Framework of Reference for lang for all programmes of degree level and a lite. The test certificate, which must be must pass each of the four components. Pass marks will be recorded on the appoplication for a Tier 4 student visa.	eir first language are required uages) level B2 for programr above. Countries not includ- still within its validity date ran of the test (reading, writing,	mes below degree level and SELT ed in this requirement are listed o nge, will be required by West Dea speaking and listening) at the
Please confirm	that you are able to comply with this re	equirement. Signature	

Other applications: If you are applying to another institution please give the name and the programme for which you have applied
PLEASE EXPLAIN WHY YOU WISH TO FOLLOW THE PROGRAMME
If there is insufficient space to complete your answer, please continue on a separate sheet of paper.
VALUATING VOLUNITENIN TO NO LIBONI COMBLETINIC VOLID CTUDICS
WHAT DO YOU INTEND TO DO UPON COMPLETING YOUR STUDIES?
.
STATE SUBJECTS OR HISTORICAL PERIODS IN WHICH YOU HAVE A PARTICULAR INTEREST

ARE THERE ANY COLLECTIONS, MUSEUMS OR GALLERIES THAT YOU KNOW PARTICULARY WELL?

REFERENCES (Professional or Academic) Download the reference form here.

Please arrange for two referees to complete and return the confidential referee forms <u>direct to the college</u> as soon as possible. <u>A delay in Admissions receiving the references can delay the assessment of your application</u>

Name of referee	Email		
Address			
Telephone/Mobile			
Name of referee	Email	_	
Address			
Telephone/Mobile			
Where did you hear about this prog	gramme at West Dean College?		
☐ West Dean College Website	☐ Prospectus	☐ Advertisement (please specify)	
☐ Word of mouth	☐ Internet search	☐ Professional recommendation	
☐ Other website (please specify)	☐ Other (please give details)	☐ Our eNewsletter	
Please add further details			
APPLICATION CHECKLIST please	make sure you include the followin	g (please tick)	
☐ One passport size photo attached	d to the space provided on the froi	nt of the application form	
☐ Copy of passport (All UK and overseas students must provide a copy of their passport)			
☐ Copy of transcripts/education qu	alification certificates		
☐ English Language Certificate (if ap	oplicable)		
☐ E-portfolio of work related to app	plication		
☐ Academic Writing example (eg dissertation)			
☐ I confirm that I have read and understand the College's Student Terms and Conditions (www.westdean.org.uk/study/student-information/terms-and-policy)			
I declare that to the best of my knowledge the information given in this form is correct			
Signature	Date		
Send your completed application form and supporting documents to: Admissions Officer, West Dean College, Chichester, West Sussex, PO18 0QZ, UK T +44 (0) 1243 818291			