

APPLICATION FORM

FdA HISTORIC CRAFT PRACTICES*

Please tick which specialism you are applying for:			
Clocks Furniture Metalwork Musical Instruments		Photo	
Which academic year are you applying for?			
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.

Other

Before you commence your programme of study at West Dean College you must ensure that you have 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			

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.

Please tick v Clocks Musical I	irm your namewhich specialism you are applying for: Furniture		Metalwork
DATE	NAME OF SCHOOL/UNIVERSITY/COLLEGE	COURSE ATTENDED	QUALIFICATION GAINED
DETAILS C	OF RELEVANT EMPLOYMENT AND EXPE	rience	
DATE	OCCUPATION	NAME OF EMPLOYER	SKILLS USED
Applicants f (Common I CEFR level the UKVI w College. You required level the student	ICY IN ENGLISH (for those whose first lander for programmes for whom English is not the European Framework of Reference for lang B2 for all programmes of degree level and a rebsite. The test certificate, which must be sour must pass each of the four components wel. Pass marks will be recorded on the appears of application for a Tier 4 student visa.	eir first language are required uages) level B2 for programmabove. Countries not includ still within its validity date ra of the test (reading, writing, plicant's Confirmation of According	mes below degree level and SELT ed in this requirement are listed or nge, will be required by West Dea speaking and listening) at the

Other applications: If you are applying to another institution please give the name and the programme for which you have applied			
PLEASE EXPLAIN WHAT TYPE OF WORK YOU HOPE TO BE ENGAGED WITH ON THIS COURSE AND WHY IT APPEALS TO YOU			
If there is insufficient space to complete your answer, please continue on a separate sheet of paper.			
PLEASE DESCRIBE YOUR PRACTICAL CRAFT OR TECHNICAL EXPERIENCE AND INDICATE HOW YOU ANTICIPATE IT WILL HELP YOU WITH THIS COURSE			
DESCRIBE YOUR LEVEL OF HAND SKILLS			

WHICH OBJECTS OR HISTORICAL PERIODS DO YOU HAVE A PARTICULAR INTEREST IN?
WHAT DO YOU INTEND TO DO UPON COMPLETING YOUR STUDIES?
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 $\underline{\text{direct to the college}}$ as soon as possible. A delay in Admissions receiving the references can delay the assessment of your application

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 following (please tick) One passport size photo attached to the space provided on the front of the application form Copy of passport (All UK and overseas students must provide a copy of their passport) Copy of transcripts/education qualification certificates English Language Certificate (if applicable) E-portfolio of work related to application Academic Writing example 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				