

Postgraduate Application Form

Before completing this form, please ensure that you have read the guidance notes thoroughly. Please complete in black ink using BLOCK CAPITAL LETTERS.

ID

Section 1 Personal details

Title (Mr/Mrs/Miss/Ms)	Surname/family name			
Forenames (in full)				
Preferred first name				
Previous surname/family name (if applicable)				
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>	Date of birth	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Home/permanent address		Correspondence address (if different)		
Postcode (UK only)		Postcode (UK only)		
Country		Country		
Correspondence address valid from		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	to	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Telephone number		Mobile number		
Fax number		Email address		
Unique Learner Number		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

Section 2 Programme of study

Please complete part A or B. All applicants should complete part C.

Part A – Taught programme

Title of course applied for (e.g. MA Marketing):

Alternative choice

Part B – Research programme

Proposed area of research:

Leading to the award of MPhil PhD New route PhD Other (please specify)

If you have already discussed your application with a potential supervisor at the University of Portsmouth, please provide their name.

Part C – All applicants

Mode of study Full time Part time Start date

Location Distance learning Campus-based

Have you studied at the University of Portsmouth previously? Yes No

If yes, which course(s)? Year of leaving Student number

Section 3 Residence

Nationality (as stated in your passport)	Country of birth
Area of permanent residence	Nationality of parent(s)
Residential category (please refer to guidance notes)	<input type="checkbox"/>

Section 4 Non-UK nationals

Date of first entry to live in the UK	<input type="text" value="d"/> <input type="text" value="d"/> <input type="text" value="m"/> <input type="text" value="m"/> <input type="text" value="y"/> <input type="text" value="y"/>	Have you been granted Indefinite Leave to Enter or Remain?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Passport number	Passport issue date			
Passport expiry date	Passport place issued			
Student visa required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		

Section 5 Equal opportunities monitoring *(please refer to guidance notes)*

The University of Portsmouth is committed to a policy of equal opportunities. The details you provide will help us monitor the effectiveness of this policy. The information will be used for statistical purposes only and will not be used as part of the selection process.

Ethnic origin	Please enter the code that best describes your ethnic origin.			<input type="text"/>	<input type="text"/>
Disability/ special needs	Do you have a disability or a medical condition that might require special arrangements or facilities?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please enter the relevant code	<input type="text"/>	
DSA	Will you be in receipt of Disabled Student's Allowance (DSA)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>		
Previous qualification	Please enter the code that describes the highest academic qualification you have achieved.			<input type="text"/>	<input type="text"/>
Socio-economic background	If you are under 21, please enter the code that best describes the socio-economic background of the highest-earning family member of the household in which you live. If you are 21 or over, please enter the code that best describes your own socio-economic background.				

Section 6 Criminal convictions

If you have a relevant criminal conviction please tick the box *(please refer to guidance notes)*

Section 7 Funding

Please enter the code that describes your proposed means of financial support

Section 8 Previous education

Please provide details of your academic qualifications including any current studies, listing your current/most recent studies first. Please enclose evidence of your academic qualifications with your application (e.g. copies of certificates or transcripts).

Attendance dates From	Attendance dates To	Name of institution	Title of qualification	Subject	Result/Grade (if known)

Section 9 English language proficiency

If English is not your first language, please tell us about any English language qualifications you hold and provide original or certified copies of your English language certificates with your application form.

IELTS:	Overall score	Reading	Listening	Writing	Speaking	Date
TOEFL:	Computer-based		Paper-based		Internet-based	Date
Cambridge Test:			Advanced score		Proficiency score	Date
Other:	Title				Score	Date

If you are planning to take an English language test, please give details.

Test to be taken _____ Approximate date to be taken _____

Have you been educated in English? Yes No If yes, please state number of years _____

Section 10 Professional qualifications

Please provide details of any professional or other qualifications that you hold.

Date taken		Title of qualification	Professional/Awarding body
Month	Year		

Section 11 Employment and work experience

Name of employer	Job title	Main responsibilities	Dates of employment	
			From	To

Section 12 References (please refer to guidance notes)

The University requires two references in support of your application. Please provide details of your referees below and send each of your referees a copy of the enclosed reference request sheet as soon as possible. Please note that it is your responsibility to contact your referees. We are unable to make a decision about your application until we receive your references.

1. Name	2. Name
Position	Position
Address	Address
Telephone number	Telephone number
Email address	Email address

Section 13 Personal statement

Please write a statement to support your application to study on this course. Note that your application will not be processed without a personal statement. Please refer to the guidance notes for further assistance and continue on a separate sheet if necessary.

Section 14 Nominated access

If you would like to nominate someone, e.g. parent/guardian/adviser, who can discuss your application with us if you are unavailable, please provide details below.

Full name of nominee

Relationship to you

Section 15 Research proposal (*research applicants only*)

If you are applying for a research programme, you are required to include an outline of your proposed research with your application form. Please note that your application will not be processed without a research statement. Please refer to the guidance notes for further assistance.

Section 16 Declaration

I confirm that, to the best of my knowledge and belief, the information given on this form is true, complete and accurate. I understand that any offer of a place at the University of Portsmouth will be based upon the information given in this form. If the University of Portsmouth discovers that I have made a false statement or have omitted significant information from my application form, the offer may be withdrawn. I accept that the information given on this form will be retained by the University and used for the purpose of processing my application, in accordance with the provisions of the Data Protection Act 1998. I understand that the information stored by the University of Portsmouth may be used for reporting, both internally and externally and that the University may also check the information provided with any previous educational establishment I have attended and with the Immigration Service. If accepted onto a programme of study, I agree to abide by the University's rules and regulations.

Signature

Date

Please return your completed application together with evidence of your academic qualifications and your references to:

Admissions
Academic Registry
University of Portsmouth
University House
Winston Churchill Avenue
Portsmouth PO1 2UP
United Kingdom

Telephone: +44 (0)23 9284 8484
Fax: +44 (0)23 9284 3082
Email: admissions@port.ac.uk
Web: www.port.ac.uk