

## PTFI Programme Application Form PhD Application

In addition to the information provided in this form, please email the following to <a href="mailto:admissions@union.ac.uk">admissions@union.ac.uk</a>:

- Curriculum vitae
- Sample of academic work
- Letter of intent (if insufficient space on this form)
- Two signed letters of reference in support of your application
- Academic transcript(s) and a copy (or copies) of degree certificates to support your application
- English language requirement certificate (if applicable)
- A document to confirm your identity, name and date of birth
- Thesis Proposal

Please indicate your proposed Primary Supervisor:

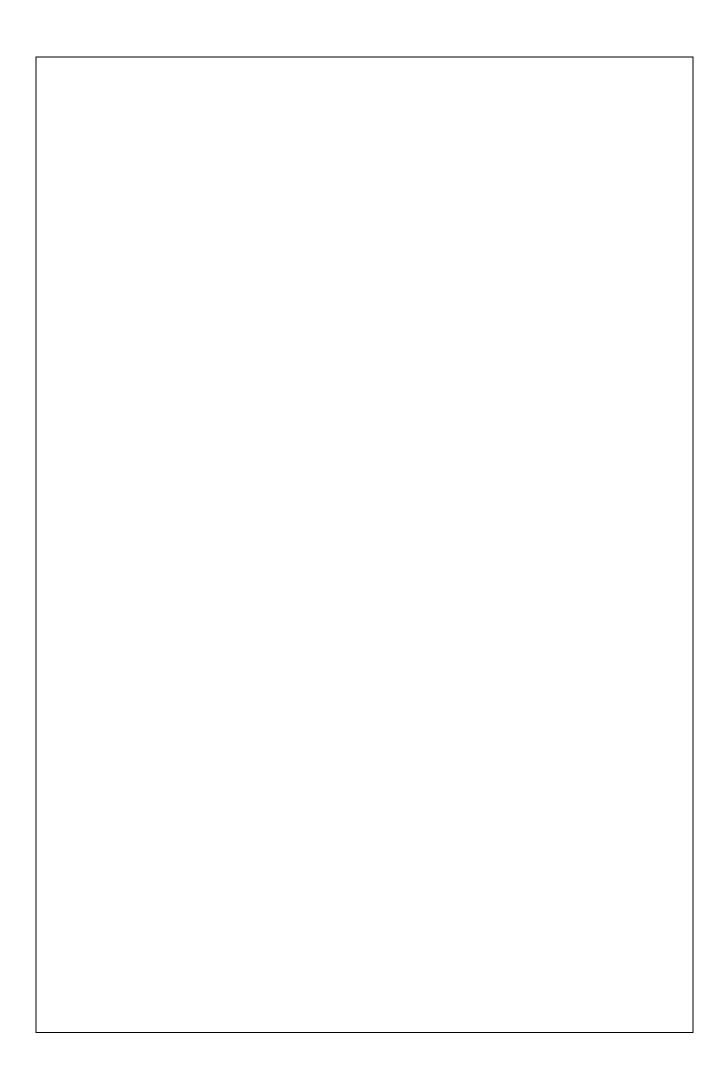
Mode of study (Full-Time/Part-Time):

PERSONAL DETAILS	
Title: (Mr/Miss/Ms/Mrs)	Surname:
Forename(s):	Previous Surname:
Known as:	Date of Birth:
Gender: Female   Male  Prefer not to say	Home Address:  Postcode:

Term A	Address (if differer	nt):							
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Postco									
Mobile	e number:			Persor	nal E	mail:			
Countr	ry of Birth:			Nation	nality	<b>/</b> :			
	PRIMARY EDUC								
Name 8 attendi	& Address of Scho	ools/Colleges a	ttended/curre	ntly	utly UCAS School Dates				Dates
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Date	Subject & Level	Awarding Body	Grade	Date	Su	ıbject & Level	Awa Bo	rding ody	Result/ Grade
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Level	Subject	Awarding Body	Date of Exam	Level	Subject	Awarding Body	Date of Exam
				<b>4</b>			

PERSONAL STATEMENT/	LETTED	∩E	INITENIT
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Yes 🗖	No 🗖			
You are requested to state whether or not you have any relevant criminal convictions. Relevant criminal convictions are those convictions for offences against the person, whether of a violent or sexual nature, and convictions for offences involving unlawfully supplying controlled drugs or substances where the conviction concerns commercial drug dealing or trafficking. Convictions that are spent (as defined by the Rehabilitation of Offenders Order (NI) 1978) are not considered to be relevant and you are not required to declare them.				
If you have not been convicted of a criminal offence you must tick the 'No' box.				
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EQUAL OPPORTUNITIES  This information is used for monitoring purposes only and w	ill not influence any decision regarding your application	
Ethnic Origins  Please tick the box that best describes your ethnic origin	Asian or Asian British  African or African British  Caribbean or Caribbean British  White British  White Irish  Other  Prefer not to say	
Disability	No disability  Dyslexia  Visual disability  Deaf/Hearing Difficulty  Mobility Difficulty  Personal Care Support  Mental Health Difficulties  Autistic Spectrum  Other	
Special Needs or Support Required Please detail any support required		
Parental Information Please indicate if any of your parents/guardians achieved a recognised higher education qualification. This includes a degree or diploma in higher education	Yes  No	

Time in Care The College, in line with other Higher Education Institutions, collects information	Yes
regarding whether or not you have been in care. This requires a yes or no response	No 🗖
DATA PROTECTION	
accordance with the General Data Protection Re We will only use your personal data if we have val	otecting the rights and privacy of individuals in egulation 2018 and the Data Protection Act 2018. id reasons for doing so and in line with our Privacy sis for processing.' In other circumstances we may
DECLARATION	
I confirm that the information given on this form information requested or other relevant informat	
I permit you to contact my current or previous sc	hool/college for the purpose of this application.
Signature:	Date: