

Application for enrolment

Please print clearly in English and in BLOCK letters and return your application to us. You must tick boxes where appropriate and note all sections are compulsory. The universities will be unable to issue any offer unless they have full details of the student applying for the program.

請以全英文填寫，另外申請 Gmail 信箱為申請學校專用帳密，為保護您的隱私，切勿提供私人信箱。

Student details					
First name		Family name			
Other names		Date of birth dd/mm/yyyy			
Email (申請專用)		Email 密碼 (申請專用)			
Age		Gender	<input type="checkbox"/> M <input type="checkbox"/> F		
Passport No.		Nationality		Country of birth	
issue date dd/mm/yyyy		Expiry date dd/mm/yyyy			
Home address				Postcode	
Home phone (including country code)		Mobile phone (including country code)			

Emergency contact details (Name as same passport)					
Name		Relationship		Country	
Home address				Postcode	
Email		Mobile phone			
Second emergency contact details (Name as same passport)					
Name		Relationship		Country	
Home address				Postcode	
Email		Mobile phone			

Payment of tuition fees	
Are you sponsored	<input type="checkbox"/> self-funded <input type="checkbox"/> family funded
Please give full name of sponsor	
Accommodation	
Your personal email and full home address must be provided to avoid delays in processing accommodation requests.	
Do you require accommodation?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Student insurance	
The cost of student health care insurance will automatically be added to your financial statement unless you can provide proof of alternative adequate cover.	
Medical/disability/special needs	
Do you have a disability, impairment or medical condition which may affect your studies?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Additional information	
Do you have any criminal convictions?	<input type="checkbox"/> YES <input type="checkbox"/> NO

Education and course selection



Please give details of your current or most recent school, college, or university.

Please include full transcripts of all your relevant academic qualifications translated into English.

Previous education		Date attended mm/yyyy			
School Name		From		To	
School Name		From		To	
School Name		From		To	

Previously studying abroad			
Have you ever had a foreign visa refusal?	<input type="checkbox"/> YES <input type="checkbox"/> NO *If yes, which country visa it was?		
Have you studied abroad before?	<input type="checkbox"/> YES <input type="checkbox"/> NO *If yes, please provide details below.		
Which country have you studied in the past?			
Course studied			
Type of visa	If applicable	Visa dates	If applicable
Date of first entry to the UK	dd/mm/yyyy		
Date of most recent entry to the UK	dd/mm/yyyy		

Which university do you want to study at?	
Please give the names of the universities you would like to apply to, and the degree you would like to study	
1	University
	University degree choice (e.g. BSc Finance)
	When would you like to start? mm/yyyy
2	University
	University degree choice
	When would you like to start?
3	University
	University degree choice
	When would you like to start?
4	University
	University degree choice
	When would you like to start?
5	University
	University degree choice
	When would you like to start?

Declaration and signature

This application must be signed; otherwise it will not be accepted.

Undertaking - by the student

By ticking this box I confirm the following:

- ★ I am applying to enroll the person named as a student of the International Study Centre. I undertake to pay all tuition and accommodation fees incurred by the student as they become due in accordance with the ISC Terms and Conditions and, where relevant, either to give the required notice of cancellation or to pay the required fees in lieu of notice.
- ★ I agree that where I do not meet the entry requirements for the selected course or suite of courses I will be offered an alternative course.
- ★ I declare that to the best of my knowledge, the information supplied within this application and the documentation supporting it is correct and complete. I acknowledge that the provision of false or misleading information may result in non-acceptance of the application or immediate exclusion from school.
- ★ I agree that I have been given the opportunity to be fully informed of all course and regulatory requirements related to my enrolment. I agree to be bound and abide by all conditions, terms, policies, and procedures applicable to my enrolment as amended from time to time.
- ★ I authorize ISC, where necessary, to obtain from any other educational institution evidence of my academic records or seek other corroborating evidence with respect to my application.
- ★ By signing this application I acknowledge that I have read the Privacy Policy and consent to the use and disclosure of my personal information as set out in the Privacy Policy.
- ★ I have advised you of any medicines currently being taken, or any ongoing medical condition.

Full name :

Date :

Undertaking - by the parent, legal guardian, or sponsor

By ticking this box I confirm the following:

- ★ I am the student's parent or legal guardian or have the full and express authority and consent of the student to submit this application on their behalf.

Full name :

Date :