

## FOUNDATION DEGREE ARTS APPLICATION FORM

|  |                          |
|--|--------------------------|
| Which academic year are you applying for?            |                          |
| Please indicate which programme you are applying for |                          |
| Books and binding                                    | <input type="checkbox"/> |
| Clocks   | <input type="checkbox"/> |
| Furniture  | <input type="checkbox"/> |
| Metalwork  | <input type="checkbox"/> |
| Musical Instruments                                  | <input type="checkbox"/> |

| PERSONAL DETAILS                               |  |
|--|--|
| First name(s):                                 |  |
| Surname:                                       |  |
| Title (e.g. Mr/Mrs):                           |  |
| Date of Birth (dd/mm/yyyy):                    |  |
| Nationality:                                   |  |
| Passport number:                               |  |
| Current address:                               |  |
|  |  |
|  |  |
| Telephone:                                     |  |
| Mobile:  |  |
| Email:   |  |
| Permanent address,<br>if different from above: |  |
|  |  |

## Fees

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

| Please state how your fees will be funded: | Amount |
|--|--------|
| Self                                       |        |
| Awards, scholarships, bursaries            |        |
| Bank loans                                 |        |
| Other                                      |        |

## Disability Declaration Form

This form will be detached from your main application form.

West Dean 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 the College to inform you about the support that is available.

| Please tick all that applies:   |  |                          |
|---|--|--------------------------|
| No known disability   |  | <input type="checkbox"/> |
| A specific learning difficulty e.g. dyslexia, dyspraxia or AD(H)D   |  | <input type="checkbox"/> |
| A social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder                |  | <input type="checkbox"/> |
| A long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy |  | <input type="checkbox"/> |
| A mental health condition, such as depression, schizophrenia or anxiety disorder                              |  | <input type="checkbox"/> |
| A physical impairment or mobility issues, such as difficulty using arms or using a wheelchair or crutches     |  | <input type="checkbox"/> |
| Deaf or a serious hearing impairment  |  | <input type="checkbox"/> |
| Blind or a serious visual impairment uncorrected by glasses   |  | <input type="checkbox"/> |
| A disability, impairment or medical condition that is not listed above (please specify below)                 |  | <input type="checkbox"/> |
| 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<br>(Proof of academic qualifications may be required) |                           |                  |               |
|---|---------------------------|------------------|---------------|
| Dates   | School/University/College | Course attended  | Qualification |
|   |                           |                  |               |
|   |                           |                  |               |
|   |                           |                  |               |
|   |                           |                  |               |
|   |                           |                  |               |
| DETAILS OF RELEVANT EMPLOYMENT AND EXPERIENCE   |                           |                  |               |
| Dates   | Occupation                | Name of employer | Skills used   |
|   |                           |                  |               |
|   |                           |                  |               |
|   |                           |                  |               |
|   |                           |                  |               |

Proficiency in English (For those whose first language is not English)

Applicants for programmes for whom English is not their first language are required to have attained SELT CEFR (Common European Framework of Reference for languages) level B2 for programmes below degree level and SELT CEFR level B2 for all programmes of degree level and above. Countries not included in this requirement are listed on the UKVI website. The test certificate, which must be still within its validity date range, will be required by West Dean. You must pass each of the four components of the test (reading, writing, speaking and listening) at the required level. Pass marks will be recorded on the applicant's Confirmation of Acceptance for Study (CAS) prior to the student's application for a Student Visa.

Please confirm that you are able to comply with this requirement.

Signature \_\_\_\_\_

## PERSONAL STATEMENT

Please explain what type of work you hope to be engage with on this course and why it appeals to you, include information on your practical craft or technical experience and indicate how you anticipate it will help you with this course. Please also include information on your current level o hand skills, objects or historical periods you have a particular interest in and what you intend to do upon competing your studies.

If there is insufficient space to complete your answer , please continue on a separate sheet of paper.

| REFERENCES  |  |
|---|--|
| (Professional or Academic) Download the reference form <a href="#">here</a> .   |  |
| Please arrange for two referees to complete and return the confidential referee forms 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 1:  |  |
| Address:  |  |
|   |  |
| Telephone/mobile:   |  |
| Email:  |  |
| Name of referee 2:  |  |
| Address:  |  |
|   |  |
| Telephone/mobile:   |  |
| Email:  |  |

| Where did you hear about this programme at West Dean? |                          |                                |                          |
|---|--------------------------|--------------------------------|--------------------------|
| West Dean website                                     | <input type="checkbox"/> | Word of mouth                  | <input type="checkbox"/> |
| Internet search                                       | <input type="checkbox"/> | Professional recommendation    | <input type="checkbox"/> |
| Social Media  | <input type="checkbox"/> | Advertisement (please specify) | <input type="checkbox"/> |
| College eNewsletters                                  | <input type="checkbox"/> | West Dean Open Day             | <input type="checkbox"/> |
| Other website (please specify)                        | <input type="checkbox"/> |                                |                          |
| Other (please give details)                           | <input type="checkbox"/> |                                |                          |

| APPLICATION CHECKLIST   |  |
|---|--|
| Please make sure you include the following (please tick)          |  |
| One profile photo, please send by email with your application     |  |
| Copy of passport (All UK and overseas students must provide this) |  |
| Copy of transcripts/education qualification certificates          |  |
| English Language Certificate (if applicable)                      |  |
| E portfolio of work related to application                        |  |
| Academic writing sample   |  |

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | I confirm that I have read and understood the College's Student Terms and Conditions ( <a href="https://www.westdean.ac.uk/degrees-and-diplomas/terms">https://www.westdean.ac.uk/degrees-and-diplomas/terms</a> ) |
|--------------------------|--|

I declare that to the best of my knowledge the information given in this form is correct.

By completing this application form I authorise West Dean to process my application through UCAS.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Send your completed application form and supporting documents to:

E [admissions@westdean.ac.uk](mailto:admissions@westdean.ac.uk)

Digital applications are preferred, however if you would like to post your application, please use the following address:

Admissions Officer, West Dean College, West Dean, Chichester, West Sussex, PO18 0QZ, UK  
W [www.westdean.ac.uk](http://www.westdean.ac.uk)