



INTERNATIONAL STUDENT APPLICATION FORM

Please complete all sections applicable to you in CAPITAL LETTERS. Please remember to include copies of all transcripts and certificates, details of your English Language qualification and an academic reference. If you cannot provide transcripts, because you have not yet completed your most recent studies, then send them as soon as they are available - in the meantime please give us as many details as you can of your academic record. WITHOUT THIS INFORMATION ASSESSMENT OF YOUR APPLICATION WILL BE DELAYED. This form must be posted or faxed, details given at the bottom of this form. Please note that, in the case of UCAS degrees, the University will need to formalise unconditional offers of places via the UCAS Record of Prior Achievement (RPA) scheme.

Postgraduate Scheme of Study Only

Student Number

1. PERSONAL DETAILS

Title: Mr Mrs Ms

Surname/Family Name: _____

Previous Surname/Family Name: _____

Other Names: _____

Correspondence From: ___ / ___ / ___ To: ___ / ___ / ___

Address: _____

Postcode: _____

Telephone No. (including area code): _____

Fax No. (inc. area code): _____

Email: _____

Permanent home address (if different to correspondence address)

Address: _____

Postcode: _____

Telephone No. (including area code): _____

Fax No. (inc. area code): _____

Email: _____

Nationality: _____

Date of Birth: ___ / ___ / ___ Male Female

First Language (if other than English) _____

Do you have a Disability/Special Needs? _____

Do you have any criminal convictions? Yes No *If Yes please provide further details in writing

2. PROPOSED STUDY

Title of course: _____ Year of Entry: ___ / ___ / ___

YTick Qualification aims: MPhil PhD MA MSc MBA

Have you previously applied for admission to Postgraduate studies at this University?: Yes No

If yes please give year of application: _____

3. FINANCE

Name of individual or organisation providing funds for study: _____

Is this definite proposed? Yes No

Please note that evidence of financial support or award will be required prior to enrolment

4. YOUR EDUCATION

Please give details of your first degree (or equivalent qualification)

Awarding Institution or Body: _____

Official Name of your Qualification: _____

Subject Area: _____

Result/Classification: _____ Date of Awards: ___ / ___ / ___

Name and postal address of the Institution at which you studied for your first degree:

Name: _____

Address: _____

Dates of Attendance: From: Month _____ Year _____ To: Month _____ Year _____

Note: If you accept the offer to undertake postgraduate studies here, it will be necessary to contact the awarding institution directly to confirm the details of your degree.

Higher Degrees and/or Professional Qualifications:

Titles: _____ Date(s) of Award(s): ___ / ___ / ___

Titles: _____ Date(s) of Award(s): ___ / ___ / ___

Titles: _____ Date(s) of Award(s): ___ / ___ / ___

Name of the Institution or Awarding Body: _____

English Language Proficiency – applicable only if your first language is not English

Please give TOEFL, IELTS or CPE score. Copies of the relevant certificates need to be attached.

Name of test: _____ Score: _____

Date of most recent test: _____ Date of forthcoming test: _____

Use this space to add any further information regarding your English Language proficiency (e.g. if your High School /College/University course was taught through the medium of English).

You may be required to undertake further studies in English before you commence your undergraduate studies

5. EMPLOYMENT and/or WORK EXPERIENCE

(Please give details of employment/work experience to date)

Job Title, Nature of Work/Training	Name of Company/Organisation	FT/PT	From		To	
			Month	Year	Month	Year

6. PERSONAL STATEMENT

(Please tell us why you are applying, and why we should want you as a student)

If this space is not sufficient you may attach additional sheets to your application form

7. ACADEMIC REFERENCES

Applications cannot be processed without references. Please provide the names, positions and addresses of two academic or work-related referees. Reference Forms are supplied with this application form to enable referees to reply direct to the Admissions Office.

First Referee: _____

Name: _____

Position: _____

Address: _____

Telephone No.: _____

Email: _____

First Referee: _____

Name: _____

Position: _____

Address: _____

Telephone No.: _____

Email: _____

8. DECLARATION

I confirm that the information provided on this application form is true, complete and accurate, and that no information requested or other material information has been omitted. I understand that the University reserves the right to establish the authenticity of my application and that it reserves the right to cancel my application if it transpires that false information has been provided.

Signature of Applicant: _____ Date: ___ / ___ / ___

When completed, this application should be returned to:

**The International Office, Swansea Metropolitan University,
Mount Pleasant, Swansea SA1 6ED UK.**

Tel: +44 (0)1792 481090 • Fax: +44 (0)1792 481085 • Email: international@smu.ac.uk

How did you learn about the Study Programmes at Swansea Metropolitan University?

World Wide Web Prospectus Word of Mouth Careers Service Education Fair
Former students Professional recommendation Education Advisors British Council

Other (give details)

Checklist - please make sure that you include the following:

- Application form (signed and dated)
- Letter of reference
- Photocopies of any relevant academic documents and their verification of authenticity
- Photocopies of any English Language result, if applicable

Data Protection Act 1998 Statement:

The University is a data controller in terms of the 1998 legislation. The Academic Registry Department follows the University policy on matters of data protection. The data requested in this application form is covered by the notification provided by the University under the Data Protection Act. Personal data will be used solely within Academic Registry for the purpose of making admission decisions and supporting records of the named student for his/her academic studies. Where appropriate, the data may be processed by the Computing and Information Services and for health and safety purposes. The data will not be passed to any third party without your consent, except where the University is by law required to do so. Appropriate security is in place to ensure that sensitive personal data is retained confidentially and is not retained for longer than necessary in providing student administration support.

Any formal queries concerning the use of data noted here should be addressed to the University's Data Protection Officer.

When completed, this reference should be returned to:

The International Office, Swansea Metropolitan University, Mount Pleasant, Swansea, SA1 6ED, UK

Tel: +44 (0)1792 481090, Fax: +44 (0)1792 481085

Email: international@smu.ac.uk

OPEN REFERENCE

The applicant has applied to this University to pursue a programme of study. Please complete this form to enable us to evaluate the candidate's suitability for admission to the above programme. Please comment specifically upon the applicant's qualifications and potential to undertake the chosen advanced studies.

Name of referee (in capitals): _____

Position: _____

Tel: _____ Email address: _____

Address: _____

_____ Post Code: _____

Signature of referee: _____ Date: ___ / ___ / ___

Name of Applicant (block capitals or type) _____