



**2011 ADMISSION APPLICATION FORM**  
**APPLYING FROM ABROAD YOU MUST READ OUR CONDITIONAL OFFER LETTER BEFORE MAKING ANY PAYMENTS**

<b>FAMILY NAME</b> _____ <b>FIRST NAME</b> _____ <b>ADDRESS</b> _____ _____ <b>POST CODE</b> _____ <b>CITY</b> _____ <b>COUNTRY</b> _____ <b>MOBILE (UK)</b> _____ <b>TELEPHONE (Home)</b> _____ <b>TELEPHONE (in home country)</b> _____ <b>E-MAIL</b> _____ <b>NATIONALITY</b> _____ <b>PASSPORT No.</b> _____ <b>FIRST LANGUAGE</b> _____ <b>COUNTRY OF BIRTH</b> _____ <b>IMMIGRATION STATUS</b> <input type="checkbox"/> Non-visa <input type="checkbox"/> Have a visa already <input type="checkbox"/> Need a new visa <input type="checkbox"/> Need to extend a visa	<div style="border: 1px solid black; width: 100px; height: 100px; margin: auto;"> <p><b>PHOTO HERE</b></p> </div>
---	---

**HOW DID YOU FIND US?**  
 Friend recommended    Newspaper    Callan web-site    Our web-site    Google    FaceBook  
 Other \_\_\_\_\_

**AGE:**   currently not available for under 18    18-21    22-25    26-30    31-35    36-40    40+  
**DATE OF BIRTH** \_\_\_\_\_   **SEX:**    Male    Female  
 Do you regularly take any medications?    Yes    No   If 'Yes' give details \_\_\_\_\_  
 Do you have any medical condition? \_\_\_\_\_

**What is your level of English**  
 Stage 1    Stage 2    Stage 3    Stage 4    Stage 5    Stage 6    Stage 7    Stage 8    Stage 9    Stage 10  
 Stage 11    Stage 12    Lower intermediate    Intermediate    Upper intermediate    Advanced  
 Teacher tested \_\_\_\_\_   Test date \_\_\_\_\_   Comments \_\_\_\_\_  
 Are you a student elsewhere?    Yes    No   Year of study: \_\_\_\_\_   Subject: \_\_\_\_\_  
 Name of College/University: \_\_\_\_\_  
 Are you working?    Yes    No   Occupation: \_\_\_\_\_

**Course applied for:**  
 \_\_\_\_\_   Start date \_\_\_\_\_   Finish date \_\_\_\_\_   Number of weeks/days/hours \_\_\_\_\_  
 Hours per week \_\_\_\_\_   Study time: from \_\_\_\_\_ to \_\_\_\_\_   Study days:    Mon    Tue    Wed    Thu    Fri  
 \_\_\_\_\_ of private lessons    \_\_\_\_\_ of group modules    Other \_\_\_\_\_

<b>NEXT OF KIN IN THE UK / HOME COUNTRY</b> Name: _____ Tel/E-mail: _____ Relation to you: _____	<b>NEXT OF KIN IN YOUR HOME COUNTRY</b> Name: _____ Tel/E-mail: _____ Relation to you: _____
---	---

**DECLARATION**  
 I have read the instructions for Registration and Payment stated in the Institute's fee schedule and I have read and accept the Terms and Conditions and the Students Handbook of St. Nicholas College of London.  
**Signature:** \_\_\_\_\_   **Date:** \_\_\_\_\_  
 If you do not wish to receive any further information about St. Nicholas College please tick the box

