\\ UNIVERSITY AND COLLEGE PLACEMENT SERVICE ENROLMENT FORM

\\ Personal details (please print clearly)

Title □ Mr □ Mrs □ Miss □ Ms □ Dr □Other

Family name	First name(s)		
Date of birth (day/month/year)	Gender	□ Male	□ Female
Full address			
City			
Postal code	Country		
Home telephone	Mobile		
Fax	Email		
Country of birth	Nationality		
Country of permanent residence	Source of financial su	ipport	

\\ Summary of your academic education & qualifications

University/College/School (Most recent first)	From Mth/year	To Mth	Qualifications obtained	Final/Expected Result/GPA

\\ English language qualifications

Name of exam	Date of Exam	Final/expected result

\\ Please indicate where and what you wish to study

Month and year in which you wish to start:				
Choice of geographical area/city	a.	b.	с.	
Tick course objective:	□ Foundation □ A-levels	□ Vocational course □ Bachelor Degree	□ Masters degree	
Intended field of study (please be a	as specific as possible):			

Do you have a preferred college or university that you would like to enter?

\\ Disability/special needs

Please indicate if you have any physical or sensor disability which might affect your studies or require any special facilities

I authorise Aspect to apply on my behalf for a conditional acceptance to a University and College in the UK, Ireland, Australia or New Zealand. I authorise Aspect to sign on my behalf, the required application documents (if applicable). If required to do so, I will counter-sign these documents on my arrival.

Applicant's signature	date
Print name	

Return to your Aspect representative or the Aspect office in the country you wish to study in.

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