



## HIGHER EDUCATION SUMMER SCHOOLS LONDON REGION

### 2007 YEAR 10 STUDENT APPLICATION FORM

Name \_\_\_\_\_

School \_\_\_\_\_

#### SELECTING A COURSE

Use the Summer School Prospectus in order to decide which Summer School you wish to attend. You should fill in sections 1–4.

You should check with your parents/carers that:

- you will not be on holiday or otherwise unavailable when the Summer School at your preferred location are taking place.
- it is OK for you to choose a residential Summer School, and
- you do not have any exams or other commitments during your chosen Summer School

#### PARENT/TEACHER SIGNATURES

Please make sure your parent/carer completes Section 5. Your application **must** be submitted through your school. Please return the completed form to the teacher who gave it to you. Section 6 needs to be completed by your teacher.

**Please be aware that your application cannot be processed without parental or legal guardian and teachers' signatures.**

#### CLOSING DATE

The closing date for receipt of this application is: **Friday 23rd February 2007.**



Please do not photocopy this form. Photocopies will not be accepted. Further copies can be requested from the Coordinator.

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## SECTION 1: INFORMATION ABOUT YOURSELF

Please complete in BLOCK CAPITALS

Name: \_\_\_\_\_ Date of Birth:     /     /19

Home Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Home Postcode: \_\_\_\_\_

Contact Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Gender: Male  Female  (Please tick one box)

Which ethnic group do you belong to? This is for data monitoring purposes only. (please tick)

- White/British
- White/Irish
- White/Other
- Asian or Asian British/Indian
- Asian or Asian British/Pakistani
- Asian or Asian British/Bangladeshi
- Chinese
- Other Asian background
- Mixed White and Black Caribbean
- Mixed White and Black African
- Mixed White and Asian
- Other Mixed background
- Black or Black British/Caribbean
- Black or Black British/African
- Other Black background
- Other Ethnic background



Do you consider yourself to have a disability, special need or medical condition? If so please specify:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please note this information is for equal opportunities purposes only and will not be used for selection.

## SECTION 2: BACKGROUND INFORMATION

Please complete in BLOCK CAPITALS

Please list the subjects you find interesting and enjoy and may want to study in the future

_____	_____
_____	_____
_____	_____
_____	_____

Are you expected to or have you achieved 5 A-C GCSEs or equivalent?

Yes

No

Are you planning to go on to Further Education e.g. A/S, A Level, AVCE or BTEC?

Yes

No



## SECTION 3: PREFERENCES FOR SUMMER SCHOOL

Please complete in BLOCK CAPITALS

Use this section to indicate which Summer School you would like to apply to. You can chose 2 programmes which you should rank in order of preference, 1 being your first choice and 2 being your second choice.

Use the prospectus to help you make your choice.

Please choose one subregional programme and one thematic programme, ranking first and second choice.

University	Title	Preference 1 or 2
<b>Subregional Summer School</b>		
<b>Thematic Summer School</b>		

Please note that you will only be able to attend **ONE** Summer School.

I confirm that I wish to apply for a place at Summer School 2007. I have checked that I will be able to attend and that I do not have exams or other commitments during Summer School week.

**Signature of student:** \_\_\_\_\_



## SECTION 4: ABOUT YOU

Please complete in BLOCK CAPITALS

In no more than 200 words please tell us more about yourself to assist us in meeting your choice of Summer School. Use the following questions as a guide.

1. What are your special interests in and outside of school?
2. What are your favourite subjects?
3. What are your ambitions for the future?
4. Tell us why you should be considered for a 'Higher Education Summer School'

1	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
2	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
3	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
4	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>

## SECTION 5: PARENTAL CONSENT

Please complete in BLOCK CAPITALS

(This section **MUST** be completed by your Parent/Carer).

Name: \_\_\_\_\_ Your relationship to the applicant: \_\_\_\_\_

Your occupation: \_\_\_\_\_ Your partners occupation: \_\_\_\_\_

Have you or your partner completed Higher Education or gained a professional qualification (e.g. University Degree, HND, HNC, Teacher Training) in this country? Please note this information will be used to assess student eligibility. (If you are unsure please contact the regional office).

Yes  No  Commenced but did not complete

If yes, who was it who attended HE: You  Your Partner  Both

(Please give details of the course and the dates you attended)

You \_\_\_\_\_ Dates \_\_\_\_\_

Your Partner \_\_\_\_\_ Dates \_\_\_\_\_

### Please read the information below:

The Summer School is responsible for the welfare of your son/daughter while he/she is attending the course. As parents/carers, you are responsible for the welfare of your son/daughter up to the handover point at the beginning of the course, and again from the handover point at completion of the course. The Summer School that your son/daughter will be attending will contact you with details about these handover points and travel arrangements.

### DECLARATION TO BE SIGNED BY A PARENT/CARER

I have completed the form with the information to the best of my knowledge.

I have read the information above, and understand that I will be responsible for my son/daughter up to the handover point at the beginning of the course, and again from the handover point at the completion of the course.

The UK Data Protection Act (1998) requires us to obtain your explicit consent to process and retain your son/daughter's data. We will process this data in accordance with these principles. The data provided in this application form will be shared with your borough Aimhigher Co-ordinator, the Higher Education Summer School to which your son/daughter has been allocated, central Aimhigher offices and the student's school in order to process this application.

The information you provide will be shared with other organisations for administration, statistical and research purposes only. Other organisations with which we will share information include, the Department for Work and Pensions, HEFCE and an independent research organisation. At no time will your personal information be passed to organisations for marketing or sales purposes.

Please tick this box to confirm that you give consent to the above use of this data.

**We cannot process this application without your consent.**

Please tick this box to consent for your son/daughter to be photographed or filmed during the Summer School for publicity purposes.

I am the applicant's legal guardian Yes  No  If No, please provide the relevant contact details with this application.

I give permission for my son/daughter to attend the Summer School.

**Signature of Parent/Carer:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## SECTION 6: INFORMATION ABOUT YOUR SCHOOL

Please complete in BLOCK CAPITALS

*(This section MUST be completed by a teacher).*

Name of School:

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School Address:

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School Postcode:

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School Telephone Number:

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School e-mail Address:

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Local Education Authority:

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DfES Number:

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### **DECLARATION TO BE SIGNED BY A TEACHER**

I have checked the details on the application form. I confirm they are correct and I support this application.

Name of Teacher:

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Signature of Teacher:

Date:

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Direct Telephone Number:

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Email Address:

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Please add any relevant notes in support of this student's application (please refer to teachers notes regarding eligibility).

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Higher Education Summer Schools are funded by the European Social Fund and the Higher Education Funding Council for England through the Aimhigher initiative.