



## Application for International Students (Renens), 2023 entry

### Personal details

Surname	Given names
Date of birth	Gender at birth (and how you identify if different from Gender at birth)
Nationality  Passport No	First Language
Home address	
Email	Mobile phone

### Parent / guardian contact details

Full name	Relationship to student
Home address (please give details below or tick if same as above) <input type="checkbox"/>	
Email	Mobile phone



## Education

Please give details of your current or most recent school

Name of school
Address

## Your qualifications

Subject	Level	Grade	Subject	Level	Grade

## Subject choices

*Your subject choices will be sent to us directly from Renens High School.*

*They will attach you school report(s) to demonstrate your academic suitability for your chosen study programme at Collyer's. Certified translations must accompany any documents which are not in English.*

## English proficiency

*You will be required to sit an IELTS for UKVI test as proof of your English proficiency. The college asks for an overall score of 6.0 with no lower than 5.5. for Reading and Writing.*

*Please ensure that you can send us your certificate no later than 31st May.*

## Accommodation and welfare

Do you smoke?
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Do you have any dietary requirements (eg. vegetarian, halal) or any food allergies?

Do you have any additional needs, including specific learning difficulties such as dyslexia, physical disabilities, or mental health issues?

Please provide as much detail as you can. This will help us to ensure any appropriate support can be put in place for you. Any information shared will be treated sensitively and securely.

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### Personal statement

Please provide a statement about yourself. It should include answers to the following questions:

- Why have you chosen to study at Collyer's?
- What do you hope to gain from studying at Collyer's?
- What qualities or attributes do you feel as though you could bring to Collyer's?
- What extra-curricular activities do you take part in?
- Have you any special achievements or school responsibilities you would like to tell us about?
- What do you hope to do when you leave Collyer's?

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# COLLYER'S

Founded in 1532

A large rectangular area containing 25 horizontal dotted lines, intended for handwriting practice.



## General support

Do you consider yourself to have a learning difficulty and / or disability and / or health problem, inclusive of physical and mental health? If yes, please tick the relevant box(es) below

Yes / No

Have you previously received or used any of the following support?

- |  |        |
|--|--------|
| Note taker in class or handouts in advance   | Yes/No |
| A chaperone  | Yes/No |
| Assistive technologies. For example,, text to speech software, accessibility functions on your phone)  | Yes/No |
| Special handouts, e.g. large print, Braille – if yes, please specify (for example, the size of print you require, the colour of paper you use) | Yes/No |

In class tests or exams have you previously been given special examination arrangements, such as:

- |                   |        |
|-------------------|--------|
| Extra time        | Yes/No |
| Small room        | Yes/No |
| Rest breaks       | Yes/No |
| Use of a computer | Yes/No |
| Scribe            | Yes/No |
| Reader            | Yes/No |
| Coloured overlay  | Yes/No |

Do you have an Educational Psychologist Report/Specialist teacher written report to support your exam concessions? Yes/No

Do you anticipate having absences from college as a result of your condition? Yes/No

Do you anticipate following a reduced programme of study and/or extending the time needed to complete your programme? Yes/No

As your 'normal way of working' in your previous educational setting are there any facilities within classrooms, laboratories or other teaching facilities that you may require? (E.g. An adjustable chair, position within the classroom) Yes/No

Please identify any medical condition(s) or information not already declared that you may need additional support with. Please select any that apply from the list below:



Description	Tick	Description	Tick
ADD/ ADHD		Home Schooled	
Allergy - please specify:		Hypermobility	
Anaemia		Liver disease	
Anxiety/Panic Attacks		ME Chronic Fatigue	
Asthma		Migraine	
Blindness/Partial blindness		OCD	
Colour blindness		PoTs (Postural tachycardia Syndrome)	
Crohns		Psychosis	
Depression		PTSD	
Diabetes		Self-Harm	
Dyspraxia		Skin problems eg eczema, photosensitivity	
Eating disorders		Social Services Involvement	
Elhers Danos Syndrome (EDS)		Terminal Disease	
Epilepsy		Thyroid problems	
Forced Marriage Protection Order		Tourettes	
Fybromyalgia		Uses a wheelchair	
Gender Identity		Victim of sexual assault or abuse	
Hearing problems		Young carer	

Other

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**Declaration (To be signed by the parent/guardian if student is aged **under 18**)**

I confirm that these details are correct. I am applying to enrol this person as a student at The College of Richard Collyer. I understand the Terms and Conditions of the college. I undertake to pay all fees as they become due.

Signed .....

Name .....

Date .....

**Declaration (To be signed by the student if he/she is aged **over 18**)**

I confirm that these details are correct. I am applying to enrol as a student at The College of Richard Collyer. I understand the Terms and Conditions of the college. I undertake to pay all fees as they become due.

Signed .....

Name .....

Date .....

**Data protection**

Consent to process student data, please read and sign below.

The college needs to hold and process information about all its students (provided during application, enrolment and once on course) for various administrative, academic and health and safety reasons. The college needs your consent to do this to ensure that we meet the obligations and duties under the Data Protection Act 1998. As a college we cannot operate effectively without processing information about you, if you do not give such consent the college will be unable to offer you a place and may withdraw any offer already made.

**Consent to process**

I agree to the college holding and processing personal and sensitive data contained in this form, or other data, which the college may obtain from me or other people, whilst I am a student. I agree to the processing of such data for any purposes connected with my studies or my health and safety whilst on the premises or for any other legitimate reason. I agree to inform the college of any changes required to my data.

Student: \_\_\_\_\_

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