

Section 6: Additional Support Stockport College may be able to provide additional support for those with learning difficulties and/or disabilities

Please tell us if you have any disability or learning difficulties. (Please tick appropriate box/es)

<input type="checkbox"/> Visual impairment <input type="checkbox"/> Disability affecting mobility <input type="checkbox"/> Social and emotional difficulties <input type="checkbox"/> Moderate learning difficulty <input type="checkbox"/> Dyslexia <input type="checkbox"/> Autistic spectrum condition <input type="checkbox"/> Temporary disability after illness (e.g. post-viral) or accident	<input type="checkbox"/> Other specific learning difficulty <input type="checkbox"/> Dyscalculia <input type="checkbox"/> Other learning difficulty <input type="checkbox"/> Hearing impairment <input type="checkbox"/> Profound complex disabilities <input type="checkbox"/> Mental health difficulty <input type="checkbox"/> Severe learning difficulty <input type="checkbox"/> Speech, language or communication needs	<input type="checkbox"/> Other physical disability <input type="checkbox"/> Other medical condition (e.g. epilepsy, asthma, diabetes) <input type="checkbox"/> Prefer not to say <input type="checkbox"/> None <input type="checkbox"/> Other (please specify) _____ _____ _____
---	--	--

Do you have an Educational Healthcare Plan? Yes No

Do you have support at school/college for anything? Yes No

Equal Opportunities Monitoring - Ethnicity (Please tick which group best describes you)

White <input type="checkbox"/> English/Welsh/Scottish/Northern Irish/British <input type="checkbox"/> Irish <input type="checkbox"/> Gypsy or Irish Traveller <input type="checkbox"/> Other White background Mixed/Multiple Ethnic Group <input type="checkbox"/> White and Black Caribbean <input type="checkbox"/> White and Black African <input type="checkbox"/> White and Asian <input type="checkbox"/> Other Mixed/Multiple ethnic background	Asian/Asian British <input type="checkbox"/> Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Other Asian background Black/British <input type="checkbox"/> African <input type="checkbox"/> Caribbean <input type="checkbox"/> Other Black/African/Caribbean background	Other Ethnic Group <input type="checkbox"/> Arab <input type="checkbox"/> Other ethnic group
---	---	---

Section 7: Referees

Please give the names and addresses of two referees (These cannot be family members)

1. Someone who can comment on your suitability for the course	2. Someone who can comment on your character
Name:	Name:
Address:	Address:
Postcode:	Postcode:

For all Higher Education courses ie. HNC, HND, Foundation Degrees and Degrees please complete a Personal Statement.

Section 8: Declaration and submission

Please provide as much detail as possible; this will enable us to properly assess your suitability for the course. It is therefore in your best interests to provide us with accurate information and to ensure that you are fully informed about the course you are applying for and the commitments you would be making if you become a student at Stockport College, and to ensure that you have attached copies of your qualifications and two suitable references. By signing your application you are confirming that the information provided on this form is complete and correct.

I confirm that, to the best of my knowledge, the information given in this form is correct and complete.

Applicant's signature: _____ Date: _____


Keeping in touch

For you to stay up to date with your application process or enquiry we will get in touch with you from time to time to inform you about college events including open days and main enrolment events as well as other relevant information such as new courses or services that we intend to provide.

Please tick the boxes below to tell us all the ways you would prefer to hear from us:

Yes please, I would like to receive communications by email
 Yes please, I would like to receive communications by telephone
 Yes please, I would like to receive communications by mobile (text message)
 No thank you, I do not wish to receive communications by post

 Please return your completed form to this FREEPOST address. (NO STAMP NEEDED) **FREEPOST Stock College**

 For general course enquiries, application enquiries or to request this form in alternative formats please call: **0300 3000 090**