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**Student Application Form 2019-2020**

Please complete **ALL** sections of this form (**IN CAPITALS**) and return to us as per the details on page 4. (We are unable to process incomplete applications)

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| **Course Title:**  **Course Dates:** | |
| **Student Details** | |
| First name  Middle name Surname  ***Please provide your current postal and e-mail addresses as we may need to contact you by e-mail as well as post.***  Address  Postcode E-mail  Home telephone number Mobile telephone number  Date of birth (dd/mm/yy) Male/ Female/ Prefer not to say/ Identify as:  Ethnicity  *(please provide the relevant number from page 4)* | |
| List AS/A2 level Subjects or other Post-16 qualifications achieved or currently being studied: | School year (at time of course)  Y12 Y13 Y14 |
| **School/ College Details** | |
| School/ College Name  Address  Telephone number E-mail | |
| **Permission from Student’s School/ College – to be completed by the Villiers Park contact**  Does the student have the potential to achieve an A/A\* grade at A2? Yes/No (circle as appropriate)  I confirm that this student has been granted permission from their school or college to attend the above course which may take place during term time. We support their application to attend and agree to the ‘*Payment Information and Terms and Conditions*’ on page 3.  Name (please print)  Role  Signature Date  Email | |

## Student Information Please read and complete the following

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| **UK Data Protection Legislation**  The personal and sensitive information you supply on this form will be stored in a secure database for the purposes of administering the Villiers Park Inspiring Excellence Programme. Villiers Park Educational Trust will retain it for monitoring and promotion purposes after you attend the course. Your data will be shared with partner organisations if applicable, such as funders/sponsors. Only anonymised data will be shared with third party organisations and personal information will not be shared without your express written consent. **Any of your data that we use in our reports will be made anonymous before it is published**. |
| Medical Information Please give details of any current and/or long term medical conditions, including medication  Please give details of any allergies to any medication, food, pollen etc.  I undertake to inform Villiers Park staff of any change in the above medical circumstances between the date signed and the start of the course.  Name of student’s GP Telephone Number |
| **Dietary Requirements** (e.g. vegetarian, vegan, allergies, food intolerances or you do not eat a specific food type(s))  We endeavour to cater to all dietary requirements, however we cannot guarantee that all food has been prepared in an environment free from contact with allergens or is free form allergenic ingredients. |
| Emergency Telephone Numbers Please list below emergency contact names and telephone numbers other than your home number  1. Parent(s)/Carer(s) name Telephone number  Relationship to student  2. Additional emergency contact name Telephone number  Relationship to student |
| Publicity (circle as appropriate) |
| Occasionally, we may take photographs or videos that include you taking part in a Villiers Park activity. As a charity, we will use these pictures to showcase the work we do, for example, in our publications, in applications for funding, on our website or our social media pages. Sometimes they may be shared with third parties, such as local newspapers.  I agree to being photographed and filmed for the purpose of promoting the educational activities Yes/No  of Villiers Park Educational Trust, during and after the course  I give permission for my written and verbal comments to be used for the purposes of promoting Yes/No  the educational activities of Villiers Park Educational Trust, during and after the course  I give permission for my contact details to be shared with other students attending the same course Yes/No |
| **Student Signature**  I agree to take part in this course by fully participating in all of the activities, some of which may take place off the premises. I acknowledge the need for responsible behaviour at all times. I fully understand and agree to the rules that students are not allowed to go to the pub, drink alcohol or take drugs during the course, and accept the Villiers Park policy as final on this matter.  I give permission for Villiers Park Educational Trust to store, process and use the personal and sensitive data supplied on this form.  Signed by student Date  Student Name (please print) |

## Parent/ Carer Information Please read and complete the following

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| **UK Data Protection Legislation**  The personal and sensitive information you supply on this form will be stored in a secure database for the purposes of administering the Villiers Park Inspiring Excellence Programme. Villiers Park Educational Trust will retain it for monitoring and promotion purposes after you attend the course. Your data will be shared with partner organisations if applicable, such as funders/ sponsors. Only anonymised data will be shared with third party organisations and personal information will not be shared without your express written consent. **Any of your data that we use in our reports will be made anonymous before it is published**. |
| **Declaration** (circle as appropriate)  Would your child be the first generation in their family to complete a University Degree? Yes/No  Has your child been eligible for Free School Meals in the last 6 years? Yes/No  Is your household income less than £33,000 per year? Yes/No  Is your child a Young Carer? Yes/No  Is your child in the care of the Local Authority? Yes/No  Is English an additional language for your child (EAL)? Yes/No  Does your child have any Special Educational Needs (SEN)? Yes/No  If yes to SEN, please specify\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Please note that we will be unable to process your application without this information; this will be stored securely and not shared with anyone outside of Villiers Park Educational Trust.** |
| **Payment Information and Terms and Conditions**  **1.** Places will not be allocated until after the relevant closing date  **2.** Schools/ colleges will be invoiced after the allocation of places and are responsible for payment. Please do not make payment with applications  **3.** Where relevant payment of the course fee (amount as indicated on the course flyer) is due within 30 days of invoice date or prior to the start of the course if sooner  **4.** Payment by bank transfer, cheque or debit card is preferred. For credit card payments a transaction fee will be added  **5.** An administration cost of £30 will be incurred for cancellation at any time after the allocation of a place  **6.** Cancellation within 30 days of the start of the course, or failure to attend, will incur full cost  **7.** Villiers Park Educational Trust is not registered for VAT.  Registered Company No: 11443649 Registered Charity No: 1179436 |
| **Parent/ Carer Signature**  I agree to my child taking part in the full duration of this course and to their participation in all of the activities, some of which may take place off the premises. I understand that there will be periods when students are unsupervised and I acknowledge the need for responsible behaviour on the part of my child. I fully understand and agree to the rule that students are not allowed to go to the pub, drink alcohol or take drugs during the course, and accept the Villiers Park policy as final on this matter.  By signing this form I give permission for Villiers Park Educational Trust to store, process and use the personal and sensitive data supplied and agree to the *‘Payment Information and Terms and Conditions’* detailed above.  I agree to my child receiving emergency medical treatment, including anaesthetic, as considered necessary by the medical authorities present.  Signed by Parent/ Carer Date  Parent/ Carer Name (please print) |

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| **White**   1. English / Welsh / Scottish / Northern Irish / British 2. Irish 3. Gypsy or Irish Traveller 4. Any other White Background, *please describe*   **Mixed / Multiple ethnic groups**   1. White and Black Caribbean 2. White and Black African 3. White and Asian 4. Any other Mixed / Multiple ethnic background, *please describe*   **Asian / Asian British**   1. Indian 2. Pakistani 3. Bangladeshi 4. Chinese 5. Any other Asian background, *please describe*   **Black / African / Caribbean / Black British**   1. African 2. Caribbean 3. Any other Black / African / Caribbean background, *please describe*   **Other**   1. Arab 2. Any other ethnic group, *please describe* 3. Prefer not to say |

## Ethnic Group Options to be used for ethnicity question on Page 1

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**Please return to Villiers Park Educational Trust using one of the methods below**

**Post to:** Royston Road, Foxton, Cambridge CB22 6SE

**Scan and e-mail to:** vp@villierspark.org.uk

For further information on how we store and process your data, please review our Privacy Policy which can be found on our website **www.villierspark.org.uk/privacy-policy** or e-mail **dataprotection@villierspark.org.uk** if you have any questions.   
If you change your mind about the publicity section of this form, please let us know by emailing us (see above). We will do everything in our power to retract the use of images featuring you, however once they are in the public domain we are unable to control their future use.