South West College Application Form 2018-19



All personal data	will be held in acc	cordance with the prov	vision of the Data P	rotection Act 1998/General	Data Protection Regulation Act 2018	••••
Surname: *				Fornames(s): *		
Title: Mr/Mrs/Miss/Ms/Dr				Date of Birth: *		
Home Address: *				Gender: *		
Tel No: *				Postcode: *		
Email: *				Mobile: *		
Present/Last School: *				Town:		
Are you applying for (please tick): Full-Time				art-Time Tra	aining	* Mandatory Fields
Choice	Choice Course Code			Course Title		
1						
2						
3						
	ALREADY TAKEN/T		interview with a ca	reers advisor Subject		Grade
	[e.g. G.C.S.E]					[if exam completed]
South West College is an Equal Opportunities College and Welcomes Applications from People with Learning Difficulties and/or Disabilities. If you require additional learning support contact the Student Support Officer at the relevant campus (number below). This is a confidential service offered by the College. Yes No Do you have any physical or learning difficulties/disabilities for which you may need extra support? If yes, please state						
MARKETING - ple	ease indicate how	you heard about the C	ollege			
Prospectus Course Leaflet Careers Teacher/School Visit to your school from us Social Media						
☐ Open Event ☐ Newspaper/Radio ☐ Website ☐ Previous Attendance STUDENT SIGNATURE						
SIGNED: DATE:						
Completed appli	cation forms shou	ıld be returned to the a	appropriate South \	West College Campus:		
				Road, ENNISKILLEN 74 6AE Tel: 0845 603 1881	Admissions Office 2 Mountjoy Road OMAGH Co. Tyrone BT79 7AH Tel: 0845 603 1881	
OFFICE USE:						
Date Received: Received By:						
Keyed By: Date Keyed:						
Location Receive	ed at:	Dungannon	Enniskillen	Omagh	If requested, the college can make	e this application
Copies to: Careers Stu			Student Supp	ort Officer	form available in alternative form	ats including large