

EDUCATION - QUALIFICATIONS ALREADY OBTAINED

22a. Detail your qualifications already obtained ensuring you start with the most recent. Where appropriate include professional qualifications.

Name of College/University/ Awarding Body (state country if outside the UK)	Start date (Month/Year)	End date (Month/Year)	Qualification (e.g. BA, BSc)	Overall class/ grade/GPA	Degree Title: Subjects studied and grades obtained so far

EDUCATION - QUALIFICATIONS CURRENTLY BEING TAKEN

22b. Detail qualifications yet to be awarded. Where appropriate include professional qualifications.

Name of College/University/ Awarding Body (state country if outside the UK)	Start date (Month/Year)	End date (Month/Year)	Qualification (e.g. BA, BSc)	Overall class/ grade/GPA	Degree Title: Subjects studied and grades obtained so far

ENGLISH LANGUAGE

23. Is English your first language? (✓)

Yes No

If "NO" detail any work experience or education that you have undertaken in English. Provide the date and grade(s) of any English language test taken. Any work experience, education or test must have been within three years of your proposed start date at UCL. A copy of the test certificate should be enclosed with this application.

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FOR OFFICE USE. ADMISSIONS ADVICE FOR THE GRADUATE ADVISER/DEPARTMENTAL ADMISSIONS TUTOR

1. Academically qualified? (✓) <input type="checkbox"/> Yes <input type="checkbox"/> Not yet <input type="checkbox"/> No <input type="checkbox"/> Dean of Students (Academic) Approval	2. Academic equivalences UK 2.2 (or overseas equivalent) UK 2.1 (or overseas equivalent) Standard of applicant	3. Met UCL English proficiency requirement? (✓) <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Comments <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		

EMPLOYMENT

24. List your employment to date. You may include a copy of your curriculum vitae if this is more convenient. Medical or dental graduates should include full details of all periods of clinical training and clinical attachments.

Name and Address of Employer (state country if outside the UK)	Start date (Month/Year)	End date (Month/Year)	Position held and main duties

25. General Medical Council (GMC)/General Dental Council (GDC) registration: if you hold either GMC or GDC registration, please provide your reference number.

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SUPPLEMENTARY SUPPORTING STATEMENT

26. Describe your academic interests and reasons for applying. Detail your career objectives and any relevant non-academic achievements as well as any publications. Outline any other relevant experience including attendance at specialist workshops or short courses. Research (MPhil/PhD etc) applicants should state in which research areas or specific projects being offered by the department they are interested. You may attach a research proposal. LLM applicants should list the four subjects they wish to study. Applicants for other taught programmes, in particular flexible programmes, should indicate, where appropriate, the options/modules in which they are likely to be interested. Continue on a separate sheet if required.

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FUNDING

Please refer to www.ucl.ac.uk/scholarships for information.

27. How will you be financing your studies at UCL? Please (✓) one or more boxes.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Personal/Family Resources	Loan	Studentship/Scholarship	Sponsorship	Other (please specify)

28. If you hold or are intending to apply for funding please state:

<input type="text"/>	<input type="text"/>	Has it been awarded? (✓) <input type="checkbox"/>	<input type="checkbox"/>
Name of Award	Value and Duration of Award	Yes	Decision Pending
<input type="text"/>	<input type="text"/>	Has it been awarded? (✓) <input type="checkbox"/>	<input type="checkbox"/>
Name of Award	Value and Duration of Award	Yes	Decision Pending

Please note, completion of this section does not constitute an application for funding.

AVAILABILITY FOR INTERVIEW

29. Should the department wish to interview you, please indicate any periods when you might not be available. Overseas applicants are not normally required to attend but may be interviewed by telephone or VoIP (e.g. Skype). (Slade applicants see www.ucl.ac.uk/fine-art-portfolio)

KNOWLEDGE OF UCL

30. Where did you learn about the UCL programme applied for? Please (✓) or write in one or more boxes.

<input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
UCL Website	Other website (please specify)	Prospectus/departmental brochure	UCL academic staff
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other academic staff	Employer	Former UCL graduate	Student recruitment exhibition/fair
<input type="checkbox"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Careers Centre	Newspaper/recruitment guide/magazine advertisement (please specify)	Other (please specify)	

DISABILITY/SPECIAL NEEDS

31. Do you have a disability? (✓) Yes No Please also complete the disability and ethnic origin monitoring form enclosed. Any information on disability will be passed (in confidence) to UCL's Disability Co-ordinator. If you have a disability that may require reasonable adjustments to be put in place, you must independently contact the Disability Co-ordinator to discuss your needs.

REFEREES

32. Give details of the two people who have provided the references that you are returning with this application. At least one of your referees should, if possible, be a teacher acquainted with your academic ability. If you have previously studied at a UK university, one of your referees should be a teacher concerned with your studies there. Referees should not be family members or friends.

Name	
Position	
Address	
Tel	Fax
Email	

Name	
Position	
Address	
Tel	Fax
Email	

EQUAL OPPORTUNITIES POLICY

At UCL our principal concern when considering applications is to recruit and select students who are likely to complete the programme successfully and derive benefit from it. Once these requirements are met, we regard other issues such as disability, ethnic origin, sex, marital status, number of children, beliefs relating to religion, politics and sexual orientation as irrelevant.

APPLICANT'S DECLARATION

To the best of my knowledge, the information on this application is accurate and complete. (Please note that UCL reserves the right to refuse admission or to terminate a student's attendance should it be discovered that he/she has made a false statement or has omitted significant information. If you are offered a place, you will be required to provide evidence of your qualifications.)

Data Protection Act 1998: I agree to UCL processing personal data contained on this form, or other data which UCL may obtain from me or other people or organisations while I am applying for admission. I agree to the processing and disclosure of such data for any purpose connected with my studies, or my health and safety while on UCL's premises or for any other legitimate purpose.

Signature _____ Date _____

Please return this form, together with two letters of reference, transcripts/diploma supplements (please refer to guidance notes), the disability and ethnic origin monitoring form and, where appropriate, an English language test certificate to:

ADMISSIONS, UCL REGISTRY, UNIVERSITY COLLEGE LONDON, GOWER STREET, LONDON WC1E 6BT



REFERENCE FORM FOR GRADUATE STUDY

APPLICANT'S NAME: _____

PROGRAMME OF STUDY: _____

The above student is applying to UCL for admission to a graduate programme of study. To assist us in the selection process, we should be most grateful if you could complete the four sections of this form.

1. (a) How long have you known the applicant?

(b) In what capacity do you know the applicant?

(c) If you are an academic referee, please indicate the cohort against whom you are measuring the applicant (e.g. number of students/all students in current year/all students you have ever taught):

2. Please assess the applicant on a scale of 1 (lowest) to 10 (highest) in relation to the following criteria by circling the appropriate number:

Intellectual ability	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Motivation	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Written communication skills	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Oral communication skills	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Ability to organise workload	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Originality	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Overall assessment of applicant	1	2	3	4	5	6	7	8	9	10	Unable to Comment

3. We would be grateful if you would comment in writing on the applicant including if they have not yet graduated, what final degree classification or grade he/she is expected to obtain and any further relevant information, for example performance in the workplace or suitability for the programme applied for. (Continue overleaf or include a separate signed letter on headed paper if preferred.)

4. Recommendation (✓)

I strongly recommend this applicant for the above programme of study.

I recommend this applicant for the above programme of study.

I do not recommend this applicant for the above programme of study.

I am unable to comment.

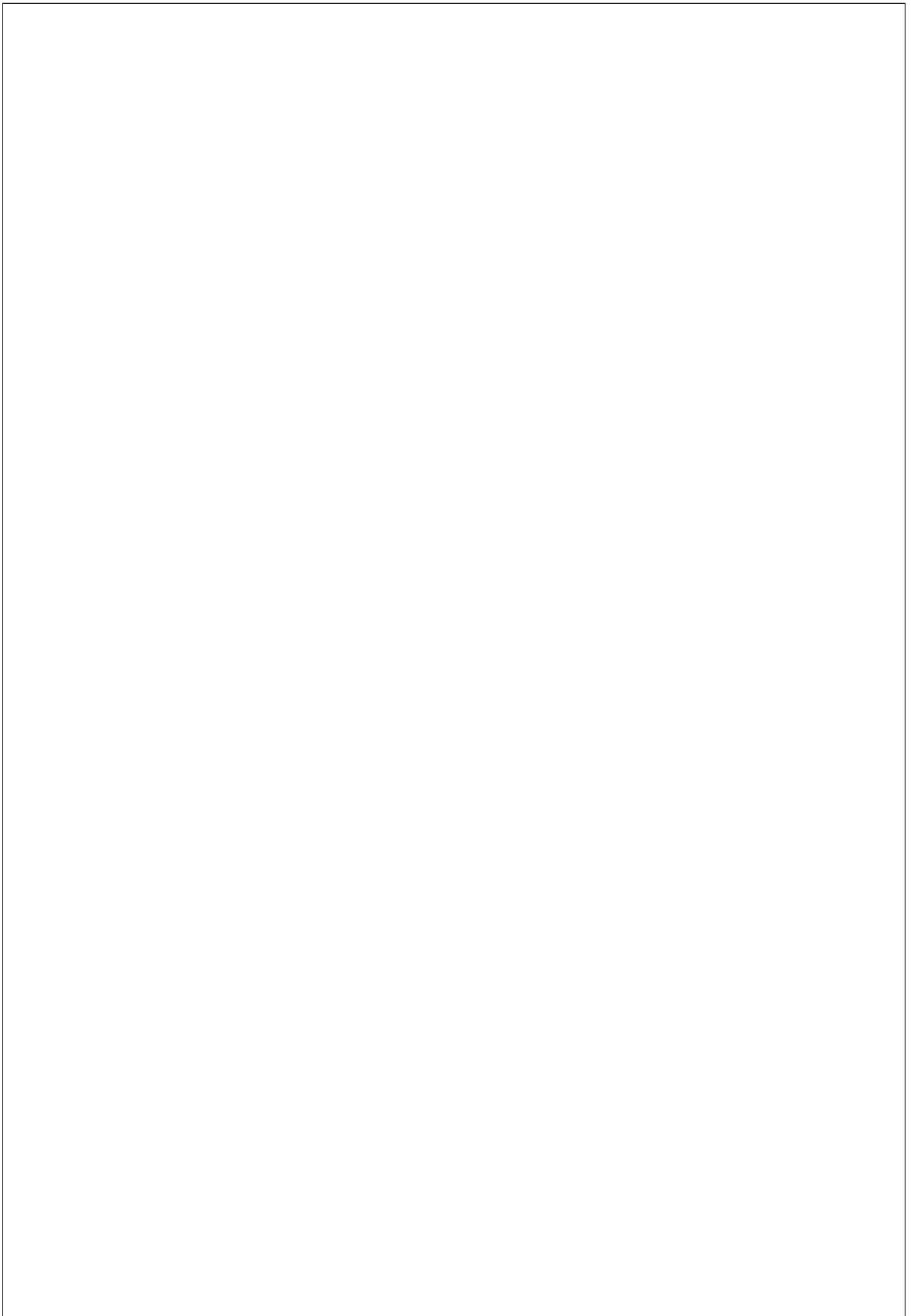
CONTACT DETAILS

Name _____ Signature _____ Position _____

Tel _____ Email _____ Date _____

Thank you for your co-operation in completing this form. Please enclose this form and each letter in the envelope provided and sign across the seal before returning it to the applicant. Under the terms of the 1998 Data Protection Act, an applicant has the right to access any reference submitted to UCL. Please tick this box if you do not wish the applicant to have access to this reference.

ADMISSIONS, UCL REGISTRY, UNIVERSITY COLLEGE LONDON, GOWER STREET, LONDON WC1E 6BT, UNITED KINGDOM





REFERENCE FORM FOR GRADUATE STUDY

APPLICANT'S NAME: _____

PROGRAMME OF STUDY: _____

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1. (a) How long have you known the applicant?

(b) In what capacity do you know the applicant?

(c) If you are an academic referee, please indicate the cohort against whom you are measuring the applicant (e.g. number of students/all students in current year/all students you have ever taught):

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Intellectual ability	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Motivation	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Written communication skills	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Oral communication skills	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Ability to organise workload	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Originality	1	2	3	4	5	6	7	8	9	10	Unable to Comment
Overall assessment of applicant	1	2	3	4	5	6	7	8	9	10	Unable to Comment

3. We would be grateful if you would comment in writing on the applicant including if they have not yet graduated, what final degree classification or grade he/she is expected to obtain and any further relevant information, for example performance in the workplace or suitability for the programme applied for. (Continue overleaf or include a separate signed letter on headed paper if preferred.)

4. Recommendation (✓)

I strongly recommend this applicant for the above programme of study.

I recommend this applicant for the above programme of study.

I do not recommend this applicant for the above programme of study.

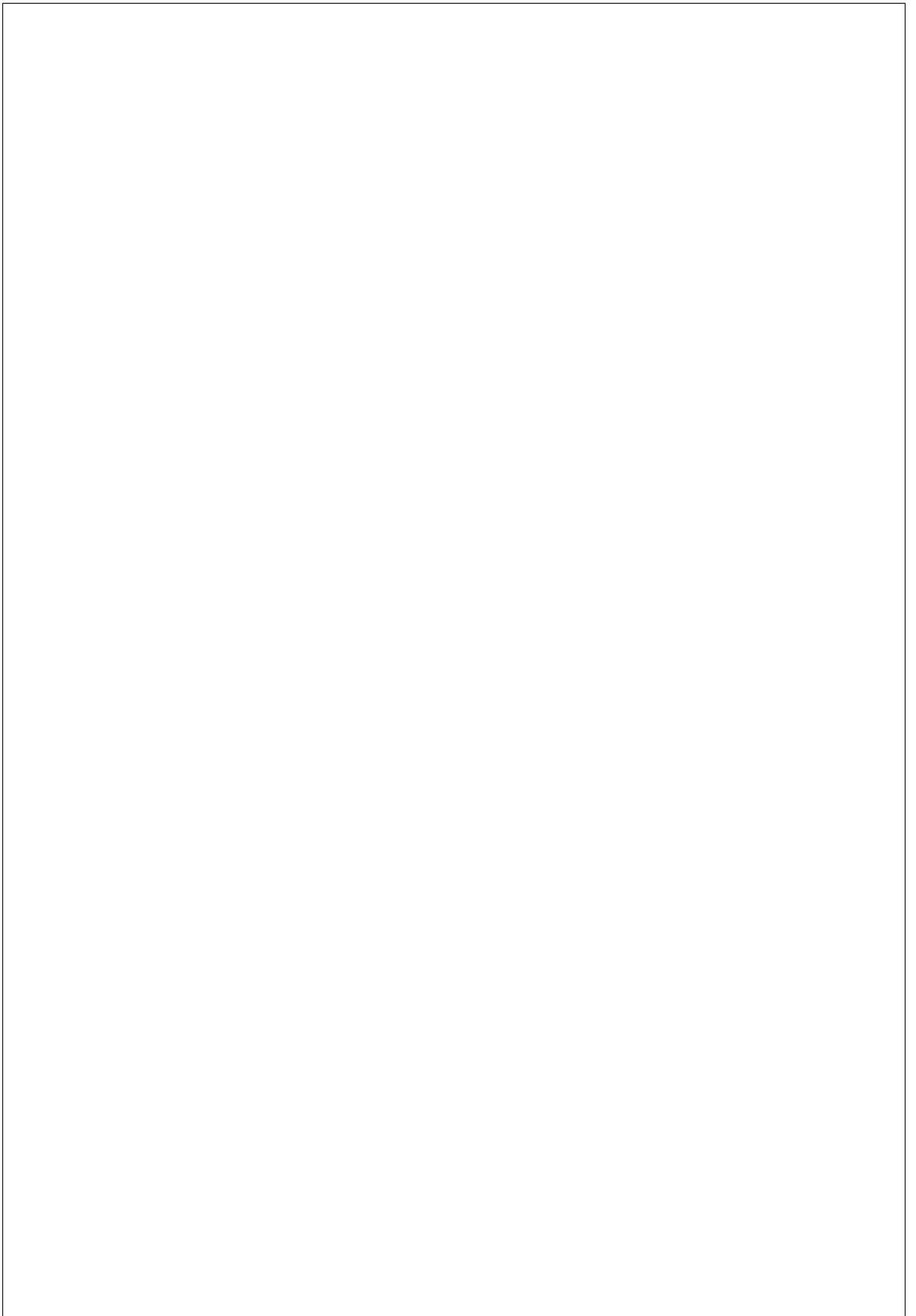
I am unable to comment.

CONTACT DETAILS

Name _____ Signature _____ Position _____

Tel _____ Email _____ Date _____

Thank you for your co-operation in completing this form. Please enclose this form and each letter in the envelope provided and sign across the seal before returning it to the applicant. Under the terms of the 1998 Data Protection Act, an applicant has the right to access any reference submitted to UCL. Please tick this box if you do not wish the applicant to have access to this reference.





DISABILITY AND ETHNIC ORIGIN MONITORING FORM

Please note that this form will not be passed to any admissions tutor. UCL is required to supply this personal information to the Higher Education Statistics Agency.

If you have a disability that may require adjustments to be put in place, you must contact UCL's Disability Co-ordinator, email: disability@ucl.ac.uk telephone: +44 (0)20 7679 0100; fax: +44 (0)20 7916 8530; address: UCL Registry, University College London, Gower Street, London WC1E 6BT.

SURNAME

FIRST NAMES

DISABILITY

 Please (✓) one box

- | | |
|--|--|
| A <input type="checkbox"/> No disability | G <input type="checkbox"/> You have a specific learning difficulty such as dyslexia, dyspraxia or AD(H)D |
| B <input type="checkbox"/> You have a social/communication impairment such as asperger's syndrome/other autistic spectrum disorder | H <input type="checkbox"/> You have physical impairment or mobility issues, such as difficulty using your arms or using a wheelchair or crutches |
| C <input type="checkbox"/> You are blind or have a serious visual impairment uncorrected by glasses | I <input type="checkbox"/> You have a disability, impairment or medical condition that is not listed above |
| D <input type="checkbox"/> You are deaf or have a serious hearing impairment | J <input type="checkbox"/> You have two or more impairments/and or disabling medical conditions |
| E <input type="checkbox"/> You have a long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease or epilepsy | 97 <input type="checkbox"/> Information refused |
| F <input type="checkbox"/> You have a mental health condition such as depression, schizophrenia or anxiety disorder | |

Are you currently or have you previously been in receipt of a UK disabled student's allowance? Please (✓) one box

- Yes No

ETHNICITY

 Please (✓) one box

- | | |
|--|---|
| 10 <input type="checkbox"/> White | 34 <input type="checkbox"/> Chinese |
| 14 <input type="checkbox"/> Irish Traveller | 39 <input type="checkbox"/> Other Asian background |
| 21 <input type="checkbox"/> Black or Black British – Caribbean | 41 <input type="checkbox"/> Mixed – White and Black Caribbean |
| 22 <input type="checkbox"/> Black or Black British – African | 42 <input type="checkbox"/> Mixed – White and Black African |
| 29 <input type="checkbox"/> Other Black background | 43 <input type="checkbox"/> Mixed – White and Asian |
| 31 <input type="checkbox"/> Asian or Asian British – Indian | 49 <input type="checkbox"/> Other Mixed background |
| 32 <input type="checkbox"/> White Asian or Asian British – Pakistani | 80 <input type="checkbox"/> Other Ethnic background |
| 33 <input type="checkbox"/> Asian or Asian British – Bangladeshi | 98 <input type="checkbox"/> Information refused |

Please return this form with the rest of your application to:

ADMISSIONS, UCL REGISTRY, UNIVERSITY COLLEGE LONDON, GOWER STREET, LONDON WC1E 6BT, UNITED KINGDOM



FINE ART APPLICANTS ONLY

APPLICANTS FOR THE MA, MFA, MPHIL/PHD OR GRADUATE AFFILIATE STUDY IN FINE ART

PAYING YOUR PORTFOLIO HANDLING FEE BY CREDIT/DEBIT CARD

If you wish to pay your Portfolio Handling Fee by credit or debit card, complete the form below, detach it and enclose it with your application form. If you are paying by cheque or banker's draft see the instructions at www.ucl.ac.uk/fine-art-portfolio and clip the cheque/draft to your form.

Cut here

Payment of Graduate Portfolio Handling Fee for:			
Forename _____		Surname _____	
<input type="checkbox"/> I would like to pay my Graduate Portfolio Handling Fee of		£25	
I would like to pay by:	<input type="checkbox"/> Visa	<input type="checkbox"/> Mastercard	<input type="checkbox"/> Maestro
American Express is not accepted	<input type="checkbox"/> Maestro UK	<input type="checkbox"/> Switch	<input type="checkbox"/> Solo
Card Holder Name _____			
Card Number _____			
Start Date (mm/yy) _____		Expiry Date (mm/yy) _____	
Card Issue Number (Maestro/Marstro UK only) _____		Security Code (last 3 digits on signature strip) _____	
Signature of Card Holder _____		Date _____	
THIS SECTION WILL BE DESTROYED ONCE PAYMENT HAS BEEN PROCESSED:			
Full billing address of Card Holder (including postcode): 			

Cut here

PORTFOLIO LABEL

Please fill in this label, cut out and attach to your portfolio.

Slade School of Fine Art, UCL		Portfolio Label
Surname _____		Forename _____
Address _____ _____		
Postcode _____		Tel _____
Tick as appropriate	<input type="checkbox"/> Portfolio to be returned by post (hard copy only)	
	<input type="checkbox"/> Portfolio to be collected by hand (hard copy only)	
* all portfolios on CD-R or DVD only will be disposed of by the Slade school after the admissions process is complete.		
Subject area (e.g. painting): _____		