

Our Ref:

Gateway College Application Form 2024



If you need any advice on courses or entry requirements before completing this application form please look on the website: www.gateway.ac.uk or contact Student Services at: studentservices@gateway.ac.uk.

Which academic year are you applying for:

Personal Details

Forename Surname

Date of Birth Date of entry to the UK

Gender (please select) Tick this box if you will be over 19 on 01/09/2024

Tick this box if you have a disability Tick this box if you have a learning difficulty

Medical and Health conditions

EHCP Yes No Safeguarding

CLA (LAC) Yes No Nationality

Ethnic/cultural origin (please circle):

Asian or Asian British:	Bangladeshi:	Indian:	Pakistani:
Black or Black British:	African:	Caribbean:	Black Caribbean:
Mixed, White and:	Asian:	Black African:	
White:	British:	Irish:	
Chinese:	Other (please state):		

Full Home Address:

<input type="text"/>	Home Phone Number	<input type="text"/>
<input type="text"/>	Student Mobile Number	<input type="text"/>
<input type="text"/>	Student Email	<input type="text"/>
Postcode: <input type="text"/>	Student's language	<input type="text"/>

Last School or College attended (for reference)

Name: <input type="text"/>	Tutor/Head of Year/Progress Coach email address: <input type="text"/>
Address: <input type="text"/>	
<input type="text"/>	School/College dates attended:
<input type="text"/>	From: <input type="text"/> To: <input type="text"/>
<input type="text"/>	
Postcode: <input type="text"/>	Did/Do you receive Free School Meals? Yes <input type="checkbox"/> No <input type="checkbox"/>

Emergency Contact Details:

Name <input type="text"/>	Home Number <input type="text"/>
Relationship <input type="text"/>	Mobile Number <input type="text"/>
Address <input type="text"/>	Work Number <input type="text"/>
<input type="text"/>	Contact's Email <input type="text"/>
<input type="text"/>	Contact's Language <input type="text"/>

Qualifications and Examinations

Please include all qualifications you have taken e.g **GCSE/A Level/BTEC/OCR**

Subject	Level	Predicted grade	Actual grade	Year

Course/Subject choices

Please include subject and level:
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Personal Statement (attach separate sheet if necessary)
Include hobbies, interests, Voluntary work and club memberships
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Signature of student:	Date:
Signature of parent: (If under 18)	Date:

The information on this form will be retained on a computer database and held with the provision of the Data Protection Act 1998 and other associated legislation.

Please save this form once you have filled it out and you can return it to Gateway College Student Services:

You can attach the completed form onto an e-mail and send this to: **studentservices@gateway.ac.uk**