

Application form

Please print in BLOCK LETTERS

(1) Personal

| Title: Mr Mrs Miss Other | | | | | | | | | | | | | | | | | | |
|---|--|-----------|---------------------|-------------------|--|--------------------------|---|----------------------------------|------|------|------|-------|-----|-------|------|-------|--|--|
| Family name: | | | | First name(s): | | | | | | | | | | | | | | |
| Previous family name: (if applicable) | | | | | | | | | | | | | | | | | | |
| Date of birth: DAY / MONTH / YEAR | | | Gender: Male Female | | | | | | | | | | | | | | | |
| Student address: | | | | | · ion | | | | | | | | | | | | | |
| Studerii dadress. | | | | | | | | | | | | | | | | | | |
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| Postcode: | | | | Country: | | | | | | | | | | | | | | |
| Home telephone: | | | | Mobile telephone: | | | | | | | | | | | | | | |
| Country of birth: | | | | Skype ID: | | | | | | | | | | | | | | |
| Email: | | | | | | | | | | | | | | | | | | |
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| Country of passport held: | | Pas | Passport number: | | | | | | | | | | | | | | | |
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| (2) Pathway area selection | | | | | | | | | | | | | | | | | | |
| Undergraduate Pathway Areas | | | | | | | Po | ost | grac | luat | e Po | athwo | ay | Areas | ; | | | |
| ☐ Stage 1: University Foundation | Stage 2: First Year I | Degree | | | | | ☐ Stage 1: Pre-Master's | | | | | | | | | | | |
| ☐ Accounting and Finance | Accounting and Finance | | | | | ☐ Accounting and Finance | | | | | | | | | | | | |
| | Business Managem | | | | | | | ☐ Language, Politics and Culture | | | | | | | | | | |
| ☐ Computer Science ☐ | ☐ Computer Science | | | | | ☐ Business Management | | | | | | | | | | | | |
| □ Economics □ | ☐ Criminology | | | | | ☐ Child Development | | | | | | | | | | | | |
| ☐ Engineering ☐ | ☐ Economics | | | | | ☐ Computer Science | | | | | | | | | | | | |
| ☐ Law and Criminology ☐ | ☐ Engineering | | | | | ☐ Engineering | | | | | | | | | | | | |
| ☐ Mathematics ☐ | ☐ Mathematics | | | | \square Health Science and informatics | | | | | | | | | | | | | |
| \square Media and Communication \square | ☐ Media and Communication | | | | | | | | | | | | | | | | | |
| ☐ Medicine ☐ | Medicine | | | | | | | | | | | | | | | | | |
| ☐ Human and Health Science ☐ | ☐ Human and Health Science | | | | | | | | | | | | | | | | | |
| ☐ Politics and International Relations ☐ | ☐ Politics and International Relations | | | | | | | | | | | | | | | | | |
| ☐ Psychology ☐ | □ Psychology | | | | | | | | | | | | | | | | | |
| ☐ Science ☐ | Science | | | | | | | | | | | | | | | | | |
| ☐ Sports and Exercise Science ☐ | Sports and Exercise | e Science | е | | | | | | | | | | | | | | | |
| ☐ Languages and Translation ☐ | Languages and Tra | nslation | | | | | | | | | | | | | | | | |
| Year of entry: | onth of entry: 🗌 Se | eptembe | er 🗆 | No | ven | nber | | Jar | nuar | у | | May/ | /Ju | ne | | | | |
| | | | | | | | | | | | | | | | | | | |
| (This section must be completed, including desired major, | /specialisation, whe | ere relev | ant) | | | | | | | | | | | | | | | |
| Your chosen degree: | | | | | | | | | | | | | | | | | | |
| (3) Education details | | | | | | | | | | | | | | | | | | |
| Prior education – highest level achieved | | | | | | | | | | | | | | | | | | |
| Name of qualification | | | (| | | Gro | Grades | | | | | | | | | | | |
| (eg. 'A' Levels, Year 12, Bachelors): | Name of institutio | n attend | | | | | ise individual subject grades): Date of | | | | | | | of co | mple | etion | | |
| | | | | | | | | | | | | | | | | | | |

| Name of qualification | | Grades | | | |
|---------------------------------------|-------------------------------|--------------------------------------|--------------------|--|--|
| (eg. 'A' Levels, Year 12, Bachelors): | Name of institution attended: | (itemise individual subject grades): | Date of completion | | |
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| (4) English proficiency | (7) Immigration | | | | | | | | |
|--|--|---|--|--|--|--|--|--|--|
| Please provide details of your English language qualification. | Have you previously applied for any visa to er | nter the UK? | Yes No | | | | | | |
| IELTS (Score): | If 'Yes' please complete below | | | | | | | | |
| Other ('O' Levels, Cambridge): | | First visa | Second visa (if applicable) | | | | | | |
| You must submit full academic transcripts/certificates and proof of English proficiency so that we can assess your eligibility for your selected study | Type of visa applied for (Tier 4, Short Term, other) | | | | | | | | |
| Pathway. If these documents are not submitted with this form, we will not be able to process your application. | If visa was Tier 4 please state course studied with dates | | | | | | | | |
| (5) Disabilities/Special Needs | If visa was successful please attach a copy of the visa | Attached/ Not attached | Attached/ | | | | | | |
| Please indicate in the next column whether or not you will need any additional support or facilities. We will pass this information on to our | If visa was unsuccessful please attach a copy of the refusal letter | | Attached/ | | | | | | |
| Student Services team who will liaise with you to support you through the admission process and determine whether we and the university can meet your study needs. | Have you previously been refused a visa for any other country? Yes | | | | | | | | |
| ☐ I have no known learning/physical disability | (8) Other information | | | | | | | | |
| ☐ I have a specific learning/physical disability | How did you hear about ICWS? You may tick | c more than one | e box. | | | | | | |
| Please give details of any adjustments needed and attach further information as necessary: | ☐ Exhibition/seminar ☐ Internet | | | | | | | | |
| | | | | | | | | | |
| | □ Newspaper/magazine advertisement □ British Council | | | | | | | | |
| | Recommended by an ICWS representative (agent) | | | | | | | | |
| (6) Declaration of Criminal Convictions | \square Recommended by a friend or relative | | | | | | | | |
| Please indicate if you have any unspent convictions | Is your friend/relative an ICWS student? ☐ Yes ☐ No ☐ Other: | | | | | | | | |
| of Offenders Act 1974). If you are not sure whether you should tell us about a previous conviction, you should seek further advice from a solicitor or advisory body. (9) Application checklist and declaration | | | | | | | | | |
| We require the following section to be completed in order to process your c | application. | | | | | | | | |
| Check that you have: | Check that you have attached: | | | | | | | | |
| Completed all sections of the application form | Certified copies of your academic transcripts | | | | | | | | |
| Read and understood the Conditions of Enrolment, including the Fee and Refund Policy within the brochure or on the website | □ Evidence of your English language ability if applicable □ A copy of your passport and/or visa | | | | | | | | |
| I declare that the information I have supplied on this form is, to the best of my false or incomplete information may lead to the refusal of my application or or from any educational institution that I have attended. I also authorise ICWS to seeking admission, to government bodies and to parents/sponsors if required laid out in the ICWS Payment and Refund Policy and accept liability for the pathe United Kingdom may be higher than in my own country and confirm that I information to third parties in the manner set out in ICWS's Privacy Policy, while • Disclosure to ICWS representatives (agents) acting on my behalf; • Disclosure to Swansea University to facilitate progression from ICWS to the | ancellation of enrolment. I give permission for ICW supply any relevant official records to educational . I understand that Course Fees are subject to revie syment of all Course Fees as outlined within. I unde I am able to meet those costs. I hereby consent to 10 ch includes: | S to obtain office institutions to was I accept the erstand that living | cial records which I am conditions as ng expenses in | | | | | | |
| • Disclosure to Navitas Ltd and its affiliates for the purpose of communication | , | Navitas Ltd and | d its | | | | | | |
| related companies. Tick this box if you do not wish to receive information via SMS about your offe | er. 🗆 | | | | | | | | |
| | | | | | | | | | |
| Signature: | Date: DAY / MONTH / YEAR | | | | | | | | |
| Parent/Guardian signature: (if applicant is under 18 years of age) | Date: DAY / MONTH / YEAR | | | | | | | | |
| Office use only | Agent contact details | | | | | | | | |
| Offer Details – Admission Office | Agency name: | | | | | | | | |
| | Agent Office Code: | | | | | | | | |
| | Email: | | | | | | | | |

Send your application to ICWS

ICWS Margam Building Swansea University Singleton Park Swansea SA2 8PP United Kingdom



Branch Office: