

Application Form

Please complete and return to: Admissions, Evolve, Skell House, 8 High Skellgate, Ripon, North Yorkshire, HG4 1BA

First Name:	Middle Name/s:	Surname:	Preferred Pronouns (optional):
Known as (optional):		Date of Birth:	
Contact address:			
Postcode:			
Student Mobile number:	Student Email address:	National Insurance number:	
Telephone (home):	Emergency Contact 1 Name: Number: Email: Relationship:	Emergency Contact 2 Name: Number: Email: Relationship:	
Nationality:	Have you been resident in the EU/UK for more than 3 years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
How did you hear about Evolve?			
Why did you choose Evolve? (Please mention what you would like to achieve during your time at Evolve).			

Education and Qualifications (please delete as appropriate. You have the right to let us know if you no longer give consent)

I do/do not give permission for you to contact my Last School, College or Employer in order to access my exam results, a reference, and attendance details. The details are:	
Establishment:	Preferred Contact:
My record of attendance for my final year was:	% I give permission for you to contact anyone at my previous place of education to gain details of my attendance and exam results if this box is blank.

Qualifications Gained/Exams to be taken: (This information must be completed).

Subject	Type of Qualification (e.g. GCSE, Functional Skills (FS), BTec)	Level of FS qualification If relevant e.g. entry level 1, 2 or 3, level 1 or 2	Predicted Grade (e.g. Pass, Merit, B,C,D/1-9)	Actual Grade (eg Pass, Merit, B,C,D/1-9) Please only complete if you have evidence of the result e.g. certificate or results sheet
English Language				
English Literature				
Maths				

Do you have an EHCP?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Please specify if you received any of the following support during classroom sessions and exams at School/College (These do not transfer from school and you will be reassessed for eligibility)									
<input type="checkbox"/>	Reader	<input type="checkbox"/>	Prompt	<input type="checkbox"/>	Scribe	<input type="checkbox"/>	Modified paper	<input type="checkbox"/>	Word Processor
<input type="checkbox"/>	Computer Reader	<input type="checkbox"/>	Separate Room	<input type="checkbox"/>	Extra Time	<input type="checkbox"/>	Other (please specify)		

STUDY DETAILS Evolve Full Time Study Programme	
Please Select your Core Aim option	
I wish to apply for the following Ripon Evolve full-time Study Programme course	<input type="checkbox"/> Work Experience Core Aim <input type="checkbox"/> Horticulture Core Aim
<p>Please list the types of work experience that you would be interested in. <i>If you select a Work Experience Core Aim we will start to source a work experience for you based on the information that you include on this form. Whilst we try very hard to source the placement of your dreams; we cannot always guarantee that they will be able to offer you a place. However, if you have a clear idea of where you would like to be: please do specify exact industries and organisations so that we can make contact on your behalf.</i></p> <p>My First Choice Work Experience:</p> <p>My Second Choice Work Experience:</p> <p>What are your interests and hobbies?</p>	

Equal Opportunities Information (This does not affect your application to Evolve)

Ethnic Origin

<input type="checkbox"/> British	<input type="checkbox"/> White & Black Caribbean	<input type="checkbox"/> Asian/Asian British Pakistani	<input type="checkbox"/> Chinese
<input type="checkbox"/> Irish	<input type="checkbox"/> White & Asian	<input type="checkbox"/> Other Asian Background	<input type="checkbox"/> Arab
<input type="checkbox"/> Other White Background	<input type="checkbox"/> Other Mixed Background	<input type="checkbox"/> Caribbean	<input type="checkbox"/> Any Other
<input type="checkbox"/> Gypsy or Irish Traveller	<input type="checkbox"/> Asian/Asian British Indian	<input type="checkbox"/> African	<input type="checkbox"/> Not Know/Prefer not to say
<input type="checkbox"/> White & Black African	<input type="checkbox"/> Asian/Asian British Bangladeshi	<input type="checkbox"/> Other Black Background	

Equal Opportunities Information: (Providing this information does not in any way affect your place on the course.)

Do you consider yourself to have a learning difficulty and/or disability and/or health problems?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, please enter the codes from below:	Primary:	Option 2:	Option 3:		
4	Visual Impairment	14	Autism Spectrum Disorder		
5	Hearing Impairment	15	Asperger's Syndrome		
6	Disability affecting mobility	16	Temporary Disability		
7	Profound Complex Disabilities	93	Other Physical Disability		
8	Social and Emotional Difficulties	94	Other Specific Learning Difficulty (e.g. Dyspraxia)		
9	Mental Health Difficulty	95	Other Medical Condition (e.g. epilepsy, asthma, diabetes)		
10	Moderate Learning Difficulty	96	Other Learning Difficulty		
11	Severe Learning Difficulty	97	Other Disability		
12	Dyslexia	98	Prefer Not to Say		
13	Dyscalculia				

Declaration

If offered a place, I agree to conform to College regulations. I agree to the transfer of information relating to my learning programme between Evolve, Craven College and other organisations if appropriate and relevant.
Signature Of Applicant:
Date:

It is a specific requirement of some work experience placements for you to have a DBS (Disclosure and Barring Service) check, you will be informed at interview.
 Personal data we obtain from you whilst you are a student will only be processed for any purpose connected to your studies, your health and safety whilst on these premises or for any other legitimate reason.