

# Application for admission

# Goldsmiths

UNIVERSITY OF LONDON

## Pre-sessional Programme

Goldsmiths, University of London  
New Cross, London SE14 6NW  
T 020 7919 7171 www.goldsmiths.ac.uk

<b>Last name</b>	<b>Title</b>	<b>Gender</b>	<input type="checkbox"/> Male	<input type="checkbox"/> Female
<b>First name</b> Please underline preferred first name	<b>Date of birth</b>	<b>(day/month/year)</b>		
<b>Marital status</b> single/married/separated/divorced				
<b>Place of birth</b>	<b>Passport number</b>			
<b>Home country</b>	<b>Current country of residence</b>			

<b>Home contact details</b> Address	<b>Correspondence contact details</b> Please tell us immediately if these change Address
Postcode/zip code	Postcode/zip code
Telephone	Fax
Mobile/cell phone	Mobile/cell phone
E-mail	E-mail
<b>Name and contact details of next of kin/person to be contacted in case of emergency</b> Address	<b>Referee</b> Please give the name and address of a referee who has taught or supervised you recently Address
Postcode/zip code	Postcode/zip code
Telephone	Fax
Mobile/cell phone	Mobile/cell phone
E-mail	E-mail

<b>Programme/s for which you are applying</b> Please tick appropriate box/es	<input type="checkbox"/> 1 Pre-sessional Programme	April entry (18 weeks)
	<input type="checkbox"/> 2 Pre-sessional Programme	May entry (14 weeks)
	<input type="checkbox"/> 3 Pre-sessional Programme	July entry (9 weeks)
	<input type="checkbox"/> 4 Pre-sessional Programme	August entry (5 weeks)

**Educational background (from age 15)**

Date	Name of institution	Course	Qualification

**Work experience and other qualifications****English Language Proficiency**

Type (IELTS/TOEFL etc)	Date	Score

**Why are you applying for this programme?**

Please tick appropriate box

- i preparation for undergraduate study in the United Kingdom
- ii preparation for postgraduate study in the United Kingdom
- iii other

If you have chosen i or ii please state proposed area of study

Please enclose copies of your certificate/s

**Do you have a disability or special need which may require alternative arrangements?**

If so, please give details here

**Are you registered disabled?**

Yes No

Please use this space to add anything which you wish to support your application, including any experience which is relevant and any special reasons you may have for wishing to undertake this programme. Please attach other sheets if necessary.

The above information is true and correct in every detail

Applicant's signature

Date

Once you have completed the application form please forward it to your referee to complete the following section.

To the referee

The person named on page 1 has named you as a principal referee for this application. Goldsmiths would be grateful for your comments on the candidate's academic abilities and personal qualities, and on whether they are a suitable person to pursue the programme for which they have applied. Please attach a sealed reference to this page.

Signature

Date

The reference when complete should be sent to:

Centre for English Language and Academic Writing, Goldsmiths, University of London, New Cross, London SE14 6NW, United Kingdom  
Telephone +44 (0)20 7919 7402 Fax +44 (0)20 7919 7403 E-mail eap@gold.ac.uk

# Housing form 2012 Pre-sessional programme

Please complete and return this form immediately to:  
Centre for English Language and Academic Writing,  
Goldsmiths, University of London, New Cross,  
London SE14 6NW, UK

Please print the information you write in black ink.

Where there are boxes, please tick as appropriate.

Please staple  
a recent  
photograph  
here

**Goldsmiths**  
UNIVERSITY OF LONDON

Goldsmiths, University of London  
New Cross, London SE14 6NW  
T 020 7919 7171 www.goldsmiths.ac.uk

Last name		Title	Gender	Male <input type="checkbox"/>	Female <input type="checkbox"/>
First name <small>Please underline preferred first name</small>		Date of birth (day/month/year)			
Marital status <small>single/married/separated/divorced</small>					
Ethnicity		Nationality			
Home country		Current country of residence			
Home contact details Address		Correspondence contact details Address			
Postcode/zip code		Postcode/zip code			
Telephone	Fax	Telephone	Fax		
Mobile/cell phone		Mobile/cell phone			
E-mail		E-mail			
Do you have a disability/medical condition which we should know about or which has specific accommodation requirements?					
Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, please give details			

**Area preferences**  
Please note: we cannot guarantee to accommodate your preferences

Please indicate your preferred area  Mixed sex  Single-sex  No preference

**Period of study**  
Tick the period of your proposed study  23 April 2012 - 7 September 2012  21 May 2012 - 7 September 2012  9 July 2012 - 7 September 2012  6 August 2012 - 7 September 2012

Under the terms of the accommodation agreement, acceptance of a Hall place is for the FULL period of your study. **REFUNDS of DEPOSITS or FEES** may not be paid in the event of an early departure. Your signature indicates that you understand and agree to these conditions.

The above information is true and correct. I understand that the personal data which I have provided on this form may be stored in paper and/or electronic form in accordance with Goldsmiths' policies on Data Protection (available at [www.goldsmiths.ac.uk/data-protection](http://www.goldsmiths.ac.uk/data-protection)) and with the provisions of the Data Protection Act (1998).

Applicant's signature

Date

**For Office Use:**

Applicant's received

Hall offered