



Skills DEVELOPMENT
CENTRE

Student Application Form for Admission

Which course do you wish to apply for?

Have you previously studied or applied for a course at SDC? Yes No

If so, what was your student reference number?

About you;

Title: Mr Mrs Miss Other (Please specify)

Surname: First name:

Date of Birth: Gender: Male Female

Permanent Address:

Post Code: UK Tel No:

Overseas Address:

Post Code: Overseas Tel No:

Email: Passport No:

Nationality: Country of Birth:

Date of Entry in UK:

Special Requirements:

Do you have any Disabilities:

Yes

No

If yes, please specify

Who is going to pay your fee? If you are not paying please give the name and address of your sponsor.

You're Qualifications

| Date | Qualification Achieved | Grade Achieved |
|------|------------------------|----------------|
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Referees:

Please include 2 reference letters from 2 referees. If you are a graduate please include atleast 1 academic reference.

Name:

Name:

Title:

Title:

Address:

Address:

Contact No:

Contact No:

Email:

Email:

How did you hear about SDC?

Agent British Council SDC Family Education Fair
Other Websites Friends Others

If other please

specifies:

Checklist

Applicants please attach all the following documents:

Personal Statement
Copies of all the academic documents
Copies of English Language Certificate (if applicable)
Two Reference Letters
Official translation of any documents not in English

Declaration:

I certify that the information given in this application is correct and complete.

Disclaimer:

The Centre reserves the right to make alterations to the contents or methods of delivery of courses, to discontinue, merge or combine, and to introduce new courses.

Signature of Applicant: _____ Date:

For Centre Use Only:

Courses: Date:

Decision:

Please forward this form and any other documents to:

Admission office
SDC