



# Application Form for Taught Postgraduate Programme of Study

Please read the *Instructions for Applicants* on page 10 carefully before completing this form.  
Please type or write clearly using **BLACK INK**.

## A Personal Details

Title: Mr / Mrs / Miss / Ms / Other	
Family Name:	
Given Names: (in full)	Male/Female:
Date of Birth:	Legal nationality:
Country of Permanent Residence:	

Permanent Address:	If you would prefer correspondence to be sent to a different address during the application cycle, please give details here:  Global Opportunities, HS-27, 2nd Floor, Kailash Colony Main Market, New Delhi- 110048 Ph: 91-29237795.29247796.32427795 Fax: 91-11-41632038 Email: helpdesk@global-opportunities.net
Telephone:	Between which dates is this address valid?
Fax:	Telephone:
Email:	Email:

## B Programme of Study

Programme Title:	
Department:	
In which year do you intend to begin your programme of study?	
Full Time <input type="checkbox"/>	Part Time <input type="checkbox"/>

**C Criminal Convictions**

Have you been charged with any offence in the UK or abroad that has not been disposed of?

Yes  No

Are you aware of any current police investigation in the UK or abroad following any allegations made against you?

Yes  No

If the answer to the above is "Yes", please give details of the nature of the offence, the date on which you were charged and details of any on-going proceedings against you.

**D Special Needs**

If you have any Special Educational Need for which you require support, please complete the relevant box below:

**Disability**

- |  |  |
|--|--|
| <input type="checkbox"/> 00 No known disability or Special Need    | <input type="checkbox"/> 08 Multiple disabilities                        |
| <input type="checkbox"/> 01 Learning Difficulty                    | <input type="checkbox"/> 09 Other  |
| <input type="checkbox"/> 02 Blind/partially sighted                | <input type="checkbox"/> 10 Autistic Spectrum disorder                   |
| <input type="checkbox"/> 03 Deaf/hearing impairment                |  |
| <input type="checkbox"/> 04 Wheelchair user/mobility difficulties  | <b>Disability Allowance</b>  |
| <input type="checkbox"/> 05 Require personal care support          | <input type="checkbox"/> 01 I have no known disability                   |
| <input type="checkbox"/> 06 Mental health difficulties             | <input type="checkbox"/> 02 I have a disability and receive a DSA        |
| <input type="checkbox"/> 07 Unseen disability eg. Asthma, epilepsy | <input type="checkbox"/> 05 I have a disability but do not receive a DSA |

**E Financial Support**

How will you be funding your studies?

Self  Employer/Sponsor

Please give full details of any scholarships or grants that:

You have been Awarded:

You have applied for:

Will you be able to support yourself through your studies if you are unable to secure an award:

Yes  No

If you are a sponsored student, please complete the following:

Name of sponsor:

Address:

Tel No:

Fax No:

E-Mail Address:

**F Educational Background**

Please list the academic and professional qualifications you have already obtained. If you have not yet completed your first degree studies, please give details of the results of your examinations to date and the details of your secondary level education.

Institution	Dates attended	Examinations taken with main subject	Class or Grade	Date of Award

Please give details of any examinations which you have not yet taken or awards which you will be obtaining.

Awarding Body	Examinations	Subjects	Date of Examination

*For non-native English-language speakers:* please give details of English language proficiency examinations you have taken or will be taking.

Awarding Body	Examinations	Grade or Score	Date of Examination

**G Employment and Prior Experience**

Please give details of your current employment and/or of any previous relevant employment or other prior learning and experience.

Employer	Dates	Post held and brief job description

**H Applications made to other institutions**

Please give details of other institutions to which you have also applied, indicating if any have already offered you a place.

Name of institution	Tick if you have already received an offer

**I Supporting Statement**

Please provide a personal statement supporting your application, stating relevant prior learning, employment or voluntary experience.

A large, empty rectangular box with a thin black border, intended for the applicant to write their supporting statement.

*Continue on new sheet if required.*

**J About Royal Holloway**

How did you first find out about Royal Holloway?

Education Fair <input type="checkbox"/>	Directory (please name) <input type="checkbox"/> _____
Teacher or Friend <input type="checkbox"/>	Internet/Website <input type="checkbox"/>
Careers Office <input type="checkbox"/>	Other (please specify) <input type="checkbox"/> _____

Are you a former student of the College?

Yes

No

**K Referees**

Please give the details of two referees who are familiar with your work. Then complete the applicants section of the Reference Forms on pages 11 and 13 before sending them to your nominated referees.

Referee including position	Address	Telephone and email

**L Data Protection**

Your contact details will be held on a database and may be used to send you details of other College activities and services. If you do NOT wish to receive such materials, please tick this box:

**M Checklist**

I enclose the following materials:

*Please tick as appropriate ✓*

- A photocopy of this application form including the Fee Status Questionnaire (see page 8)
- Two references
- A copy of my degree certificate(s)
- A transcript of my degree results
- A copy of my English Language proficiency examination results

**N Declaration**

I declare that the above information is correct and complete to the best of my knowledge.  
I understand that information provided by me to Royal Holloway will be treated in confidence but I agree that the College may pass information to official UK government bodies to assist in their duties.

Signature: ..... Date: .....

# Fee Status Questionnaire

Please complete the relevant sections and sign the declaration.

Personal Details		
Title Mr/Mrs/Miss/Ms/Other	First names (in full)	Student Ref No:
Surname	Programme	

## 1 EU Citizenship & Residency/Overseas

Are you a citizen of an EU country and have always lived in the EU?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you an overseas student?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>If you answer yes to one of the above, move to section 5. Otherwise, please complete sections 2-5.</i>		

## 2 Refugee Status

Have you, your child or your spouse been granted:		
Refugee status	Yes <input type="checkbox"/>	No <input type="checkbox"/> ref. no. <input type="text"/>
Humanitarian Protection	Yes <input type="checkbox"/>	No <input type="checkbox"/> ref. no. <input type="text"/>
Exceptional Leave to Enter/Remain	Yes <input type="checkbox"/>	No <input type="checkbox"/> ref. no. <input type="text"/>
Discretionary Leave	Yes <input type="checkbox"/>	No <input type="checkbox"/> ref. no. <input type="text"/>
Are you an Asylum Seeker	Yes <input type="checkbox"/>	No <input type="checkbox"/> ref. no. <input type="text"/>
<i>If you answer yes to any of the above, please provide evidence and go on to section 5</i>		

## 3 Nationality

Your legal nationality	Your spouse's legal nationality
Your father's	Your mother's

## 4 Status *Please complete the appropriate section below, according to your status. See notes overleaf for guidance.*

### 4a Non EEA

Do you have any restrictions on your right to stay in the UK?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>If yes, please specify which:</i>		
Student Visa <input type="checkbox"/>	Tourist/Visitor's Visa <input type="checkbox"/>	Work Permit <input type="checkbox"/> Other <input type="checkbox"/>
<i>If other, please specify:</i>		
Do you hold any of the following: Indefinite Leave to Enter/Remain or a certificate of the Right to Abode? Please say which and provide a copy		
Have you been Ordinarily Resident in the UK and Islands since 1st January 2004?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
<i>If no, please state when you arrived</i>		
What was the main purpose of your stay in the UK during this time?		
<i>If you have been temporarily absent from the UK in this time please give the dates of your absence, stating where you were during that absence and the purpose of your absence</i>		

**4b EU**

Are you or one of your parents an EU\* national? Yes  No

Have you been Ordinarily Resident in the EEA\*\*/Switzerland since 1st January 2004? Yes  No

If no, please state when you arrived

If you have been temporarily absent from the EEA/Switzerland in this time, please give the dates of your absence and state where you were during that absence

**4c EEA/Switzerland**

Are you or one of your parents an EEA\*\*/Swiss national? Yes  No

Are you, your spouse or one of your parents, a migrant worker in the UK? Yes  No

Have you been Ordinarily Resident in the EEA\*\*/Switzerland since 1st January 2004? Yes  No

If no, please state when you arrived

If you have been temporarily absent from the EEA/Switzerland in this time, please give the dates of your absence and state where you were during that absence

**5 Declaration**

I declare that the information given above is correct

Signature

Date

For further information on fee assessment at Royal Holloway please visit:

[www.rhul.ac.uk/registry/admissions/feesassessment](http://www.rhul.ac.uk/registry/admissions/feesassessment)

Please return completed and signed form to:  
Admissions, Royal Holloway, University of London, Egham, Surrey, TW20 0EX

Please note that:

- (a) This assessment will be based on the advice of UKCOSA, the independent charity that advises institutions on fees status in compliance with current legislation.
- (b) We have to be certain that applicants satisfy the "home fees" criteria before assessing them as such as it is on this basis that we receive government funding, hence the lower fee. Therefore, to make such a claim based on insufficient or erroneous evidence would be fraudulent and would seriously undermine the reputation of Royal Holloway as well as exposing the College to the ensuing legal implications.
- (c) We cannot assess you if you do not complete ALL parts of the form and send supporting documentation including copies of any of the documents you have declared above. Original documents must be produced at enrolment.

\* The EU consists of: Austria, Belgium, Czech Republic, Cyprus, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden & UK.

\*\* The EEA consists of the above plus Iceland, Liechtenstein & Norway.