

A warm welcome from



Thank you for your interest in our programmes and we congratulate you on taking the first step towards increasing your knowledge.

Now that you have decided on a programme to pursue, you need to provide us with the following:

Complete application form

A detailed CV

2 recommendation letters

Certified true copies of all relevant qualifications and transcript

Note: Certifying a copy can be done at lawyer offices, notary public offices, British Councils or by couriering your original transcripts to us where we will certify them and send them back to you.

The above documents should be emailed to:

Info1@stafford.ae

Please do not hesitate to contact us if we can be of any assistance.

The Stafford Team

P.O Box 500358

Knowledge Village

Block 6 – Office F01

Dubai – UAE

Ph: +971 4 3901685

Fax: +971 4 3664574

Email: info1@stafford.ae

achieve Application Form

This form should be completed in BLOCK CAPITALS and returned (along with any supporting documentation as required) to RDI, Midland Management Centre, 1A Brandon Lane, Coventry CV3 3RD, England.

PERSONAL DETAILS

Surname/Family name:	First/Given names:
Previous surname/Family name (if applicable)	Title (Dr, Mr, Mrs, Ms, Miss, etc.):
Date of birth:	Sex (male or female):
Country of birth:	Present nationality:
	Country of permanent residence:

ADDRESSES

Permanent home address:	Address for correspondence (if different from home address):
Postcode/Zip:	Postcode/Zip:
Tel: (home) (office)	Tel:
Fax:	Fax:
Email:	Email:

INTAKE DATE

Commencing in: MM YY

COURSE APPLIED FOR

AWARDING BODY

EMPLOYMENT DETAILS / OTHER EXPERIENCE

Please give details of your employment or other experience relevant to your application covering the last five years.

Enclose a CV if necessary. Indicate here if you have done so.

Employer	Titles and duties of post	Dates: From	To
		From	To
		From	To

EDUCATION AND QUALIFICATIONS

Give details of academic and professional qualifications already obtained and pending.

Enclose a CV if necessary. Indicate here if you have done so

Name of Institution / Address	Dates: (month/year) from:	Qualification/award (include class & division or grade obtained if known)	Main subjects
	to:		
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		
	from:		
	to:		

NB: You must include photocopies of all academic achievements supporting your application, including transcripts where possible.

REASONS FOR APPLICATION FOR COURSE

State your reason for wishing to pursue the course for which you have applied. Continue on a separate sheet if necessary. Indicate here if you have done this.

ENGLISH LANGUAGE COMPETENCE

Students educated outside the UK should enclose copies of their English Language qualifications.

Is English your first language? Yes No

Is/was English the language of instruction of your first Degree? Yes No

If you have answered no to both the above questions please list any formal English Language qualifications with results obtained (ie IELTS, TOEFL, GCE, GCSE) and the dates you took the test, or will be taking the test.

English Qualification:

Result:

Date:

NB: Students educated outside the UK must provide evidence, before they can be admitted to their chosen course, that they have sufficient command of both spoken and written English. Acceptable evidence includes: GCSE/O-level English Language at grade C or above; an overall score of 6.5 in the British Council IELTS test; a score of 575-600 (depending on the department) in TOEFL, including a satisfactory mark in the Test of Written English (TWE).

OTHER INFORMATION

How did you first learn about your proposed programme of study?

1. Newspaper 2. Google 3. Yahoo 4. MSN 5. Friends/Family 6. TV 7. Hotcourses

8. Other: Please specify:

Applications to other institutions: Please give details of other institutions/programmes of study for which you are applying at this time:

REFEREES

Please forward the enclosed reference forms to your two referees, giving their names and addresses below. References are required for all University programmes and should be enclosed with your application. Ideally you should nominate a professional referee as well as an academic contact.

Name:

Name:

Address:

Address:

Tel:

Tel:

Fax:

Fax:

ALL APPLICANTS should note that the Institutions reserve the right to make, without notice, changes in regulations, courses, fees etc at any time before or after a candidate's admission. Admission is subject to the requirement that the candidate will comply with the regulation procedures and will duly observe the Charter, Statutes, Ordinances and Regulations from time to time in force for the various Institutions.

DECLARATION (to be signed by all applicants) I undertake to comply with the Institution's registration procedure, duly observe the Charter, Statutes, Ordinances and Regulations and to ensure payment of all fees and other liabilities.

Signed

Date

Monitoring Information

RDI is committed to a policy of equal opportunities. In order to monitor the effectiveness of this policy, applicants are asked to complete this monitoring form. These statistics are used solely for the purpose of monitoring application rates and form no part of the selection procedure.

Please return your form together with your application to RDI.

Do you have any criminal convictions? Yes No

You are required to state whether or not you have any criminal convictions, excluding motoring offences for which a fine and/or up to three penalty points were imposed. If you tick the 'yes' box, you may be required to provide details of any convictions.

Please tick the box which you feel describes your ethnic origin.*

Black - African

Black - Caribbean

Black - Other:

Asian - Indian

Asian - Pakistani

Asian - Bangladeshi

Asian - Chinese

Asian - Other:

White

Any other ethnic group:

DISABILITY / SPECIAL NEEDS Please tick the box next to the statement which is most appropriate to you.

You do not have a disability nor are you aware of any additional support requirements in study or accommodation

You have dyslexia

You are blind/partially sighted

You are deaf/have a hearing impairment

You are a wheelchair user or have difficulties with mobility

You need personal care support

You have mental health difficulties

You have an unseen disability, e.g. diabetes, epilepsy, asthma

You have two or more of the above disabilities/special needs

You have a disability not listed above.

*These have been based on the categories in the Office of Population Censuses and Surveys (OPCS) 1991 UK.

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Reference Form

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SECTION 1

To save this form, you will require Adobe Acrobat 7 or above.

TO BE COMPLETED BY THE APPLICANT

This is one of two Reference Forms provided with your Application Form. Please complete this section before forwarding one form to each of your two referees, requesting that they complete Section 2 and a written reference on the reverse side, and return the form to RDI. Please note it is your responsibility to provide RDI with references. RDI is unable to organise references on your behalf. Your referees must be people you know in an academic or professional capacity, not a personal one. References from friends or relatives are not acceptable. References should be current and relate specifically to the course applied for.

Surname/Family name:

First names:

Title (Dr, Mr, Ms, etc):

INTAKE DATE

COURSE APPLIED FOR

AWARDING BODY

Commencing in: MM YY

Reason for Application

In order to help your referee provide an accurate reference, please give a brief description of your reasons for wishing to pursue the above course. This can be the same statement used on your application form.

SECTION 2

TO BE COMPLETED BY THE REFEREE

The above-named is applying for admission to the above programme of study and has named you as a referee. We would be grateful to receive, in confidence, your opinion of the candidate's suitability for the proposed course of study. When commenting on his/her academic/working performance please give, if possible, the applicant's class ranking/working position. If an exact position cannot be given, indicate the quartile in which you believe he/she has performed.

Please complete this form on the following page and return to RDI. Thank you for providing a reference.

Surname/Family name:

First names:

Title (Dr, Mr, Ms, etc):

Relationship to Applicant:

Address:

Telephone:

Fax:

email:

Reference

Applicant's Name

TO BE COMPLETED BY THE REFEREE

Please provide a brief assessment of the applicant's suitability to study the course applied for.

1. How long have you known the applicant and in what capacity?

2. Please discuss the applicant's strengths and weaknesses, with particular reference to suitability of the course applied for.

3. Please provide a brief statement regarding each of the following:

a. Dedication and commitment

b. Organisational skills

c. Interpersonal skills

d. Time Management skills

e. Reliability

4. Any other comments

Signature of Referee

Date