

Office Use Only	
Enrolment Received	
Student ID No:	
ASN:	

Evening Class/Leisure Course Application & Enrolment Form

Please complete using BLOCK capitals Course Details: Course Date: Course Cost: Course Ref: **Applicant Details:** Title Forename(s) (First Name) Surname (Family Name) Date of Birth Home Address: Postcode: _____ Term Time Address: Postcode: Contact Telephone Permanent Home Number: Location: E-mail Mobile Telephone Number: address: Last Year School: Left: Highest Qualification held to date: Scottish Candidate Number Not Not (SCN): (if known) Known: Registered: Would you consider yourself as: (please tick one) Home Student □ EU Student Nationality: **Additional Personal Details:** Do you consider yourself as being associated with any of the following groups? (Please tick appropriately) Care Leavers Do you have any carers responsibilities? Yes □ No □

Background Information:

At Inverness College UHI we want to make sure that all students and staff have an excellent experience and are treated fairly

When we ask you for personal information it is because we want to find out more about the people in the College so that we can make changes that can help you and others.

We must take steps to gather this information and use it to make sure that things are made fairer for people from different backgrounds and groups.

In addition to age, ethnicity and disability, listed below are 'newly' introduced protected characteristics. Please help us to make positive changes by giving us this important information.

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app	nic Group (please tick ropriately): 11 British 13 Scottish (White) 12 Irish (White) 15 Northern Irish 16 Gypsy/Traveller 17 English (White) 18 Welsh (White) se give details of any suppo	000000	31 Indian 32 Pakistan 33 Banglad 34 Chinese 39 Any othe 98 Prefer no	eshi r Asian backgro ot to say	ound	t lange	 J 21 Caribbean J 22 African J 29 Any other Black J 50 Arab B 0 Other Ethnic ba 	ckground
Disa	ability:							
The	information that you provide	de in the f	ollowing se	ction will be pas	sed, with	your a	agreement, to relevant	staff in order to
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	ase indicate any of the fo					nolica	ıble)	
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Α	No Known Disability			xia, Dyspraxia o	or \square	С	Blind/Partially Sighte	d □
			AD(H)D				
D	Deaf/Hearing		H Whee	Ichair/Mobility		J	Multiple Disabilities	
	Impairment	_	Difficu		_	Ū	Walipio Biodellino	
	impairment		Dillic	111100				
F	Mental Health Condition		E Long	standing illness		I	Disability Not Listed	
	e.g. Depression,		unsee	n Disability e.g.				
	Schizophrenia or			tes, Epilepsy,				
	Anxiety Disorder			na, Cancer, HIV				
	,			,				
В	Social/Communication							
D	Impairment e.g.	J						
	Asperger's Syndrome							
	Asperger's Syndrome							
Ple	ase tick box if you would	like Stuc	lent Service	es to contact v	ou to arr	ange	additional support (ir	ncludina
	ning support)	iiito Otac		o to contact y	ou to un	ungo	additional support (ii	
	uld you need any support	in the e	vent that w	e need to evac	uate the	huild	ings? Yes 🗖 No (
***	and you need any support		vent that w	c neca to evac	date the	Dana	ings. 103 B No i	-
Ger	nder							
Is y	our gender identity the sam	ie gender	originally a	ssigned to you a	at birth?	Yes	□ No □ Prefer	not to Say □
Rel	igion or Belief							
Wha	at religion, religious denom	ination or	body do yo	u belong to, or v	what philo	osophi	cal belief do you hold?)
No	Religion			Jewish				
Bu	ddhist			Muslim				
Ch	ristian (Church of Scotland) 🗖		Sikh				
	ristian (Roman Catholic)	, <u> </u>		Any Other				
	•			Prefer not to \$	_			
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_	and Orient di							
Sex	ual Orientation							
Which of the following options best describe how you think of yourself?								
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Bis	sexual (you are attracted to	both	Heterose	xual (you are at	tracted to	the	Other	
	nales and males)		opposite		_			
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00	y Man 🔲		Cay Work	iaii/Leopiaii L	J		i isisi ilot to Say	

	oregnant? gnant or given I ne/prefer not to	?	Yes 🗆 Yes 🗖	No No					
Source of Information	n:								
What method of commun					y to Inver	ness Colleg	e UHI?	Please tell us where	
you heard about Inverne Website	ess Colle	□ Newsp	aper/Magazir			Staff meml	oer		
☐ Radio advert ☐ Open Events		☐ Press :	Stories ′relative			Other			
☐ Facebook/Twitter									
Category of Student:									
☐ School based (P1-	7, S1-S6	s) - Year			12 Regis	tered Unen	nployed	(receiving JSA)	
	☐ 11 Permanent or Temporary Employment (incl Self ☐ 14 Not Registered Unemployed but not Working								
Source of Finance:									
				0.1					
□ 10 Employer payir	ng	□ 14 Self-f	inancing	Other	-				
Course Fee Payment:	:								
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offered or a full refund given

Student Declaration:

Liability for Payment of Fees By signing this enrolment, I acknowledge that I am personally liable to Inverness College UHI for payment of fees. In the event of any fee paying authority or other person or body not making payment on my behalf, I undertake to make payment of the full amount due to Inverness College UHI.

Regulations By signing this declaration you confirm that you have read and agree to abide by the regulations of the College as supplied to you. Failure to comply with the regulations may result in disciplinary action and ultimately possible exclusion from your studies.

Fair Processing Notice

Inverness College UHI is committed to ensuring that the processing of personal data is only undertaken in the legitimate operation of the College's business. The College collects and uses information (data) about its students and stores it in accordance with the Data Protection Act 1998.

Personal Data and Sensitive Personal Data – The personal data that you supply to us may be processed by Inverness College UHI, the University of the Highlands & islands or by one of the UHI academic partners. All processing will be undertaken in accordance with the Data Protection Act 1998. By providing us with your personal data and signing below, you provide your explicit consent to us processing the said data for the purposes of administering your educational programme. We will only provide such data to third parties where we are obliged to do so by law; for statistical reporting (e.g. Scottish Funding Council); to awarding agencies for certification purposes; and to employers and sponsoring bodies who pay student fees.

To the best of my knowledge the information I have given on this form is correct. I agree to abide by the Inverness College UHI Academic Regulations and Student Code of Conduct.

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Student Signa	ture:	Date: _			
College Signat	ture:	Date: _			
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For Office	Budget Code	Area Code		Account No	