



Application form

Please print in BLOCK LETTERS

(1) Personal

Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Other	
Family name:	First name(s):
Previous family name: (if applicable)	
Date of birth: / / (dd/mm/yy)	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Student address:	
Postcode:	Country:
Country of birth:	
Home telephone:	Mobile telephone:
Email:	
Country of passport held:	Passport number:

(2) Programme selection

<input type="checkbox"/> International Foundation Programme	<input type="checkbox"/> 1st Year Degree
Leading to:	Leading to:
<input type="checkbox"/> Business <input type="checkbox"/> Engineering <input type="checkbox"/> LLB Law <input type="checkbox"/> Mathematics <input type="checkbox"/> Computing <input type="checkbox"/> Creative Technologies <input type="checkbox"/> Science	<input type="checkbox"/> Business <input type="checkbox"/> BA Law
Year of entry:	Month of entry: <input type="checkbox"/> October <input type="checkbox"/> February <input type="checkbox"/> May
Your chosen Degree Course at University of Portsmouth after ICP:	

(3) Education details

Secondary education – highest level achieved

Name of qualification (eg. 'A' Levels, Year 12):
School attended:
Country/State:
Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No

(4) English proficiency

Please provide details of your English language qualification.

IELTS (Score):
TOEFL (Score):
Other (HKCEE, O-levels, Cambridge):

Full academic transcripts/certificates and proof of English proficiency are important to assess your eligibility for our programmes. If these documents are not submitted with this form, we will not be able to process your application

(5) Declaration of Criminal Record

In accordance with UK law, you are required to state if you have any criminal convictions.

Please indicate if you have any criminal convictions.

Yes No

(excluding spent convictions and minor motoring offenses for which the penalty was a fine and/or up to 3 penalty points)

If you tick yes, you may be required to provide details.

(6) Disabilities/Special Needs

Please indicate below whether or not you will need any additional support or facilities. This information will be passed on to our Academic Board, who will liaise with you and the academics in the department who will support you through the admissions process and determine whether we can meet your study needs.

<input type="checkbox"/> No known disability
<input type="checkbox"/> I have a specific learning/physical disability
* Please give further details below and if necessary attach further information to this form

(7) Have you ever studied previously in the UK?

<input type="checkbox"/> Yes <input type="checkbox"/> No	
From: / / (dd/mm/yy)	To: / / (dd/mm/yy)
Name of School/University:	

(8) Other information

How did you hear about ICP? You may tick more than one box.

<input type="checkbox"/> Exhibition/Seminar
<input type="checkbox"/> Internet
<input type="checkbox"/> Newspaper/Magazine advertisement
<input type="checkbox"/> British Council
<input type="checkbox"/> Recommended by an ICP representative (agent)
<input type="checkbox"/> Recommended by a friend or relative.
Is your friend/relative an ICP student? <input type="checkbox"/> Yes <input type="checkbox"/> No

(9) Application Checklist and Declaration

We require the following section to be completed in order to process your application.

Check that you have:

- Completed all sections of the application form
- Read and understood the Conditions of Enrolment including the Fee and Refund Policy within the brochure or on the website

Check that you have attached:

- Certified copies of you academic transcripts
- Evidence of your English language ability if applicable
- A copy of your passport and/or visa

I declare that the information I have supplied on this form is, to the best of my understanding and belief, complete and correct. I understand that the giving of false or incomplete information may lead to the refusal of my application or cancellation of enrolment. I give permission to obtain official records from any educational institution attended by me. I also authorise ICP to supply any relevant official records to educational institutions to which I am seeking admission, to government bodies and to parents/sponsors if required. I understand that fees may increase annually; I accept the conditions as laid out in the Payment and Conditions of Enrolment section of the ICP Prospectus and accept liability for the payment of all fees as outlined within. I understand that living expenses in the United Kingdom may be higher than in my own country and confirm that I am able to meet the costs.

Signed:

Date: / / (dd/mm/yy)

Office use only

Representative Stamp:

Offer Details - Admissions Office

Sending your application to ICP

Admission Manager
International College Portsmouth
Mercantile House, University of Portsmouth
Hampshire, PO1 2EG
United Kingdom

Email admission@icp.port.ac.uk
Fax +44 (0) 23 9284 8541
Apply online www.port.ac.uk/icp