

ROSE BRUFORD COLLEGE APPLICATION FORM

London's
International
Drama School



GUIDELINES FOR TIER 4 VISA APPLICANTS

To meet UK Visa and Immigration (UKVI) requirements and obtain a visa, the following finances must be in place. **This is a guide only:**

Deposit paid prior to visa application	£4,000
Balance in bank min.30 days prior visa application	£14,500
Living costs in bank min.30 days prior visa application	£11,385
Total:	£29,885*

*for 2019 entry, fees subject to change in subsequent years

COURSE SPECIFIC FEES WILL BE IN YOUR OFFER LETTER

We do not offer scholarships to applicants, however we can help you apply for a loan from your home country.

For visa information please look on the following web link:

<https://www.gov.uk/tier-4-general-visa/overview>

For visa help and advice email: international@bruford.ac.uk

Section 1: COURSE INTEREST

Course Name (please state BA/MA/MFA):

Section 2: PERSONAL DETAILS

Family Name:

Other Names:

Date of Birth:

Country of Birth:

Age on 1st September 2021:

Nationality: (if more than one, please state)

Current Permanent/Home Address

Mobile number:

Home number:

City:

Email:

County/State:

Post Code/ Zip Code:

Skype address:

Country:

NEXT OF KIN Family Name:

Other Names:

Relationship to you:

Home Address

Mobile number:

Home number:

City:

Email:

County/State:

Post Code/ Zip Code:

Country:

Have you studied in the UK previously?

Yes No

Date of first entry to the UK (if you were not born in UK):

How did you hear about the College? (tick all that apply):

Advert Social Media Career Event College Website Friend/Family member

School/ College UCAS The URTAs The Stage Other: _____

Section 2: EDUCATION AND QUALIFICATIONS

Please list School/Further/Higher Education establishments you have attended (most recent first). If you are currently still studying, please include the expected date of completion at your institution.

Name & Address of Institution	Date studied from	Date studied to

Please list examinations and the qualification(s) gained; Please list your **highest qualification first**.

Year	Subject/Module/Course	Award/Level	Result/Grade

Section 3: AUDITIONS AND WORKSHOPS

Have you already attended an audition or workshop? Yes No

Where did you attend the workshop(e.g.URTAs, USA, Norway, Iceland, London)?

What date did you attend (e.g. Jan 2019)?

Section 4: SUPPORTING STATEMENT

This statement is to support your application. Please write about your interests/passions and ambitions in relation to theatre and what is it that interest you about the specific programme. What are you hoping to get from doing the programme/s you are applying for? You may like to attach a resume or curriculum vitae to support your application.

Continued.....

Section 3: ENGLISH LANGUAGE		
Is English your first language?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If NO please give details of any English language qualifications that you have taken, for example: IELTS, or GCSE, 'A' Level.		
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Section 5: EQUAL OPPORTUNITIES

To help in the monitoring of the College's Equal Opportunities policies, please could you indicate which of the following is most appropriate (please tick):

White:	<input type="checkbox"/>	Chinese:	<input type="checkbox"/>
Black or Black British – Caribbean:	<input type="checkbox"/>	Mixed – White & Black Caribbean:	<input type="checkbox"/>
Black or Black British – African:	<input type="checkbox"/>	Mixed – White & Asian:	<input type="checkbox"/>
Mixed – White & Black African:	<input type="checkbox"/>	Other Asian background:	<input type="checkbox"/>
Other Black background:	<input type="checkbox"/>	Other mixed background:	<input type="checkbox"/>
Asian or Asian British – Indian:	<input type="checkbox"/>	Other ethnic background:	<input type="checkbox"/>
Asian or Asian British – Bangladeshi:	<input type="checkbox"/>	Not known:	<input type="checkbox"/>
Asian or Asian British – Pakistani:	<input type="checkbox"/>	Prefer not to say:	<input type="checkbox"/>

Section 6: EQUAL OPPORTUNITIES

To help in the monitoring of the College's Equal Opportunities policies, please could you indicate which of the following is most appropriate (please tick):

Section 6: DISABILITY/MEDICAL CONDITIONS/SPECIFIC LEARNING DIFFICULTIES

Rose Bruford College welcomes and encourages applications from disabled students and students with medical conditions and specific learning difficulties; for example, dyspraxia or dyslexia.

If you have a disability, medical condition or a specific learning difficulty such as dyslexia or dyspraxia, **you are strongly encouraged to contact the college** before you make an application so that a discussion about reasonable adjustments can take place. Please indicate below the type of adjustments you think you will need.

- | | |
|--|--------------------------|
| 1. A specific learning disability i.e. dyslexia, dyspraxia or AD(H)HD: | <input type="checkbox"/> |
| 2. A social communication impairment such as Asperger's syndrome/other autistic spectrum disorder: | <input type="checkbox"/> |
| 3. A long-standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease or epilepsy: | <input type="checkbox"/> |
| 4. A mental health condition, such as depression, schizophrenia or anxiety disorder: | <input type="checkbox"/> |
| 5. A physical impairment or mobility issues, such as difficulty using arms, using a wheelchair or crutches: | <input type="checkbox"/> |
| 6. Deaf or a serious hearing impairment: | <input type="checkbox"/> |
| 7. Blind or a serious visual impairment uncorrected by glasses: | <input type="checkbox"/> |
| 8. A disability, impairment or medical condition that is not listed here: | <input type="checkbox"/> |
| 9. If you have ticked 8 (A disability not listed) please give details:
_____ | |
| 10. Prefer not to say: | <input type="checkbox"/> |

Please indicate if you are willing for any information about your disability/medical conditions etc. to be disclosed to tutors during your time registered at the college:

Yes No

If you would like further information on the support that the college can provide for students with disabilities, please contact **Ros Platton**, Disability Advisor on 020 8308 2610 or email on: ros.platton@bruford.ac.uk.

Section 7: CRIMINAL RECORD

Do you hold any criminal convictions?

Yes

No

(if yes, please give further details below):

Section 8: RECOGNISING PRIOR LEARNING

The College understands that learning may take place in different settings and that you may want to use skills and knowledge you have gained elsewhere to count towards your learning with us. To support this, we have a detailed policy and procedure to guide and help you if you wish to ask for prior experience or learning to be taken into account. If you have any queries about this please email admissions@bruford.ac.uk.

Section 9: DATA PROTECTION POLICY

Rose Bruford College is committed to ensuring that personal data is handled appropriately and in compliance with data protection law, including the Data Protection Act of 2018 and the EU General Data Protection Regulations (GDPR). The link below will take you to the Student Privacy Notice which explains how Rose Bruford College collects, uses and shares your personal data, and your rights in relation to the personal data we hold. This privacy notice concerns our processing of personal data of users of Rose Bruford College services. <https://www.bruford.ac.uk/media/documents/StudentPrivacyNotice.pdf>

Section 10: DECLARATION

I confirm that the information given on this form is true, complete and accurate and no information requested or other material information has been omitted. I understand that if my application is found to contain any false entries, misleading statements or material omission, Rose Bruford College reserves the right to cancel any application and that consequently any offer made will be withdrawn or attendance suspended. I understand that the information supplied on this form will be retained by Rose Bruford College and will be used for the purpose of processing my application. In the event that my application is successful, I understand that the information will form part of my student record.

I consent to receive updates from the college

Signed: _____ Date: _____