Student Registration Form

Please refer to the associated guidance notes when completing this form.



Section 1 - Personal Details
Title
Forenames
Family name / Last Name

Section 2 - Contact Details

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Home Postcode	
Home Telephone	
Mobile Telephone	
Email	

Correspondence address (if different from your Home address)

Section 3 - Further Details					
Date of birth Gender I	dentity				
Do you have a disability or require any support require	ments?				

Section 4 - Course Details				
What course are you inter	nding to study at Nottingham	Trent University?		
What mode of study are y	ou intending to study by?			
Part-time	Full-time	Sandwich course		
Exchange	Short Course	Distance Learning		
Expected Start date				

Section 5 - R	esidency
Country of Birth	
Ethnicity	
Nationality	
What is your co	ountry of permanent (home) residence?

Section 6 - Current / Most Recent Studies

What institution are your currently attending or provide details of the last institution you attended?

What course are you currently studying or confirm the name of the last course attended?

Does this course have a formal arrangement with NTU?

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Section 7 - Other Details							
Residential Category							
Do you require a visa to study in the UK?	Yes	Νο					
What type of visa do you intend to use to study in	What type of visa do you intend to use to study in the UK?						
Have you ever studied in the UK previously?	Yes	Νο					
Please confirm your passport number							
I have attached a copy of my passport							
Is English your first language? Yes	No						
If English is not your first language please provide details of your highest English Language							
qualification.							

Section 8 - Criminal Conviction			
Do you have a criminal conviction?	Yes	No	

Section 9 - Course Specific Questions

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Answers

Please give full details of your Nursing Associate qualification (where studied, when and result)

What is your NMC PIN?

What field of nursing are you applying for?

Are you being sponsored/funded by your employer, if yes please provide contact details of your line manager. If No are you self-funding?



Please give details of your employment history since leaving school, accounting for any gaps in employment.



Identify three things that you have learned since the start of your Trainee Nursing Associate course and outline how these have influenced your clinical practice (750 words max)

signature

Please read the following carefully;

General Data Protection Regulation 2016 and Data Protection Act 2018

By submitting this application form you are consenting to Nottingham Trent University using the information you have provided to enable your application for entry to be considered. Please see our <u>Admissions Privacy Notice</u> which sets out how we use your personal data.

Terms and Conditions

Should you accept an offer to study at the University, you will be agreeing to the <u>Terms and Conditions</u> which includes the Student Privacy Notice.

The Admissions Policy forms part of the University Academic Standards and Quality Handbook.