

Nottingham Trent University
School of Architecture, Design and the Built Environment
Professional Certificate in Architecture Application Form

Solely for the use at this University for applications to the Professional Certificate in Architecture course, School of Architecture, Design and the Built Environment.

Please complete Section 1 in BLOCK CAPITALS

Application Reference No:

1. Personal

Title (Mr, Ms, Miss, Mrs, Dr): [Click here to enter text.](#)

First Name: [Click here to enter text.](#)

Surname/Family Name: [Click here to enter text.](#)

Previous Surname, if changed: [Click here to enter text.](#)

Correspondence Address:

Home Address (if different):

[Click here to enter text.](#)

[Click here to enter text.](#)

Postcode: [Click here to enter text.](#)

Postcode: [Click here to enter text.](#)

Mobile telephone no: [Click here to enter text.](#)

Mobile telephone no: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

Tel Number Daytime (incl. code):
[Click here to enter text.](#)

Tel Number Daytime (incl. code):
[Click here to enter text.](#)

Tel Number Evening (incl. code):
[Click here to enter text.](#)

Tel Number Evening (incl. code):
[Click here to enter text.](#)

2. Further Details

Sex: M F Date of Birth (DD/MM/YYYY): [Click here to enter text.](#)

3a. Fee Status

Country of Permanent Residence: [Click here to enter text.](#)

Country of Birth: [Click here to enter text.](#)

Nationality: [Click here to enter text.](#)

Residential Category (ie Home/EU, Overseas): [Click here to enter text.](#)

Date of first entry to live in UK (If applicable): [Click here to enter text.](#)

3b. Payment of Fees

Who will pay your tuition fees (please tick as appropriate):

a) Self

b) Sponsored Name of sponsor: [Click here to enter text.](#)

Status of sponsor (eg Government): [Click here to enter text.](#)

Please note: we will require a letter from your sponsor to confirm that they are willing to sponsor you.

c) Other Please state: [Click here to enter text.](#)

4a. Highest Qualification Held

Please note that you will need an undergraduate Architecture qualification with RIBA/ARB Part I status to apply for this course. Please send a copy of your transcript with this application form.

Degree Title: [Click here to enter text.](#)

Institution Graduated from: [Click here to enter text.](#)

Date graduated (DD/MM/YYYY): [Click here to enter text.](#)

4b. Qualifications Completed/Pending

Dates of study	Name of educational establishment attended	Level (eg First Degree, A Level, HND, Higher Degree or Professional Qualification)	Awarding Body (eg OCR or SQA / Subject)	Results (grades or bands)
Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.	Click here to enter text.

5. Employment Details

Please provide the name of your current employer: [Click here to enter text.](#)

Address: [Click here to enter text.](#)

Postcode: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

Tel Number Daytime (incl. code): [Click here to enter text.](#)

6. Mentor Details

Please provide the name of your proposed Mentor.

Mentor Name: [Click here to enter text.](#)

Qualifications: [Click here to enter text.](#)

Experience: [Click here to enter text.](#)

Address:
[Click here to enter text.](#)

Postcode: [Click here to enter text.](#)

Email Address: [Click here to enter text.](#)

Tel Number Daytime (incl. code): [Click here to enter text.](#)

7. Do you have any criminal convictions?

Yes No

If your answer is yes, further details will be requested should your application be successful.

8. Special Needs or Support required as a consequence of any disability of medical condition

Please provide an outline of any particular access or support arrangements that you may require as a consequence of a disability or learning support need.

[Click here to enter text.](#)

Have you applied (or do you intend to apply) for Disabled Students Allowance?

Have applied Have received Intend to apply

9. Declaration

I confirm that the information given on this form is true, complete and accurate, and no requested information or other material has been omitted.

By signing this form I am consenting to Nottingham Trent University using the information provided from time to time, along with any further information about me that the university may hold, for purposes set out in the NTU data protection notification (view this online at <http://forms.informationcommissioner.gov.uk/search.html>)

Should I be offered a place at NTU, I agree to abide by the terms set out in the University's Enrolment Conditions, in particular Condition 11 which sets out how the University will use data under the Data Protection Act 1998 (view the Enrolment Conditions at http://ntu.ac.uk/about_ntu/policies/enrolment_conditions/index.html).

Applicant's signature:

[Click here to enter text.](#)

Date (DD/MM/YYYY): [Click here to enter text.](#)

Please return this form to: cpdbe@ntu.ac.uk

