

Student Number (for office use onl	y

Application for Admission to Undergraduate Studies for International Students

Please complete all sections applicable to you in CAPITAL LETTERS. Please remember to include copies of all transcripts/certificates, details of your English Language Qualification and an academic reference. WITHOUT THIS INFORMATION ASSESSMENT OF YOUR APPLICATION WILL BE DELAYED.

1. PERSONAL DETAIL Surname/Family Name	Other Names (in full)		Previou	us Surname/Famil	y Name (if relevant)	Title
Correspondence Address	(From/ To/ date: month: year date: m	nonth: year	ermanent H	ome Address (if d	ifferent)	
Telephone No. (including area code): Fax No. (inc. area code):	Postcode:		ax No. (inc.	o. ea code): area code):	code:	
Nationality	Country of Birth	Date of date : mon		Male/Female	Disability/Specia	l Needs
Do you have any criminal	convictions? (See notes of g	guidance)	YES	№ □		
2. PROPOSED STUDY						
Course	Exact title of course to which	n you are apply	ing UC	CAS code (if releva	Level of	
3. FINANCE Name of individual or org	ganisation providing funds for	· study:	·	Is this d	efinite or proposed	?

4. YOUR EDUCATION					
Please give details of your High School Education since age 11					
Name of School attended:					
Dates of attendance:	From: Month				
	To: Month	Year			
Qualification(s) awarded with	dates:				
Please give details of your Co	llege/University Education	n if appropriate			
None of College/Hairmaite of	4				
Name of College/University at	tended:				
Dates of attendance:	From: Month	Year			
	To: Month				
Qualification(s) awarded with	dates:				
English Language Proficienc	у				
Please give TOEFL, IELTS or	CDE sage Coming of the	Use this space to add any further information regarding your			
relevant certificates need to be		English Language proficiency (e.g. if your course was taught			
Name of test:	Score:	through the medium of English).			
Date of most recent test:					
Date of forthcoming test:					

You may be required to undertake further studies in English before you commence your course

icase supply any additional detain	s to support your appli	cation octow.	
Tr J -	Transfer Jour appr		
f this page is not sufficient you may a	ttach additional sheets to	your application form	
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The above applicant has applied to Swansea University to pursue study as indicated in SECTION 2 . Please complete this form to enable us to evaluate the candidate's suitability for admission to the above programme. Please comment specifically upon the applicant's qualifications and potential to undertake the chosen advanced studies.				