

# THE UNIVERSITY *of York*

## Application Form 2010/2011 (from web)

### A. Personal details

1. **Surname** ..... Forename .....

(Mr/Mrs/Ms/Miss/Dr)

Address.....

.....

..... Postcode.....

Daytime telephone..... Evening telephone .....

Email address .....

Date of birth ..... Nationality .....

Previous Qualifications .....

Please let us know if you have any requirements because of a disability of health condition.....

.....

### B. Course details

|    |                    |            |      |             |                          |
|----|--------------------|------------|------|-------------|--------------------------|
| 1. | Course title ..... | Fee: ..... | Term | Autumn 2010 | <input type="checkbox"/> |
|    |                    |            |      | Spring 2011 | <input type="checkbox"/> |
|    |                    |            |      | Summer 2011 | <input type="checkbox"/> |
| 2. | Course title ..... | Fee: ..... |      | Autumn 2010 | <input type="checkbox"/> |
|    |                    |            |      | Spring 2011 | <input type="checkbox"/> |
|    |                    |            |      | Summer 2011 | <input type="checkbox"/> |
| 3. | Course title ..... | Fee: ..... |      | Autumn 2010 | <input type="checkbox"/> |
|    |                    |            |      | Spring 2011 | <input type="checkbox"/> |
|    |                    |            |      | Summer 2011 | <input type="checkbox"/> |

### C. Payment

I enclose a cheque for the sum of £ .....

**Please make your cheque payable to “The University of York” and send it together with this application form to: Centre for Lifelong Learning, University of York, Heslington, York YO10 5DD. Remember to include appropriate documentation if claiming a concessionary rate.**

Please let us know of any special needs you may have here:

*FOR OFFICE USE ONLY*

Student Record No.:

Cheque/Cash:

Receipt No.:

Payment cleared: