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**HEALTH ECONOMICS**

*for*

**HEALTH CARE PROFESSIONALS**

POSTGRADUATE CERTIFICATE AND DIPLOMA PROGRAMMES BY DISTANCE LEARNING

*Application for Study*

Please read the documents: *Health Economics for Health Care Professionals by Distance Learning: An introduction to the Certificate and Diploma programmes* and *Further Programme Details* before completing this application. Please complete this form in dark blue or black ink, as we will need to photocopy it. Feel free to continue on an additional sheet if there is not enough space for you to answer some of the questions.

**1. Personal details**

Surname/family name			
Forename(s)			
Title (e.g. Mr, Mrs, Miss, Ms, Dr)			
Previous surnames (where applicable)			
Date of birth (date/month/year)		Gender (male/female)	
Home address			
Postcode		Country	
Telephone			
Fax			
e-mail			
Nationality			

**2. Current employer's details (if applicable)**

Your position in organisation			
Name of employer			
Employer's address			
Postcode		Country	
Telephone			
Fax			
e-mail			

To which address would you like correspondence sent?

Home address       Employer's address

**3. Type of programme** If you wish to study for the *Certificate* please tick the first space. If you wish study for the *Diploma*, please tick the second space. All students will register on the Certificate programme initially. Please note the year in which you would like to start the programme.

Certificate       Diploma

Proposed start year (e.g. 2012, 2013)

#### 4. Reasons for applying

Please tell us why you wish to apply for the programme. If you do not possess the minimum degree-level entry requirements, please give a summary of your work and other experience that you would like us to take into consideration. Continue on another sheet if necessary.

#### 5. Details of computer access

The programmes currently use Yorkshare, a web-based learning environment, to supplement the learning materials. You will be able to access Yorkshare via a PC or MAC linked to the World Wide Web (WWW). Your PC will need to have Internet Explorer 7 (or higher) or Firefox 3.5 or equivalent browser and be enabled for running java and java script. To check whether your browser is compatible with Yorkshare, please click on the HELP tab in Yorkshare(vle.york.ac.uk) and view the results in the supported features window. Then click on the 'software' tab to obtain information about whether your browser is fully supported in Yorkshare.

I can access a PC at home  I can access a PC at work  I have no PC access

*Training on Yorkshare will be provided at the first workshop. Please note that we are unable to provide training in general computing matters concerning working within a windows environment such as file management, e-mail and using a web browser, and you should ensure that you are familiar with such matters before you start the programmes. You are responsible for your own computing hardware, software mounted on it and the link to your Internet Service Provider; the University of York cannot provide support for these.*

#### 6. Proficiency in English

If English is not your first language, please state your qualifications and proficiency in it.

*If you have taken an IELTS or TOEFL test, the Cambridge Certificate of Proficiency in English, or another recognised English language test, please attach a copy of your test score report.*

#### 7. Other languages

Please indicate any languages, other than your own, of which you have knowledge. Specify whether written or spoken and give some indication of your level of attainment.

#### 8. Education

(a) Schools attended since age 14.

Name of school	Dates of attendance	
	From	To

(b) University/college.

Name of university/college	Dates of attendance		Main subjects	Qualifications	Class or grade
	From	To			

Please attach copies of your degree certificate(s), transcript(s) and/or official award letter(s).

(c) Examinations still to be taken

Examination	Main subject	Date

Please send us copies of your degree certificate, transcript and/or official award letter as soon as it is available.

### 9. Employment

Please list your previous employment in chronological order, putting your most recent post first.

Employment	Position held	From	To

### 10. Other applications

(a) Have you applied to the University of York before? If so, please give details of the dates and course(s) for which you applied.

(b) Are you applying to other universities? If so, please give details.

### 11. Referees

Please enclose with your completed application confidential references from two referees, one of whom should be an academic referee. The second can also be an academic referee, your current employer or a former employer. Both individuals should be able to comment in detail on your capacity to cope with the academic demands of the programme. Each referee should place the confidential letter of reference in an envelope, seal the envelope and sign across the seal, cover the signature with clear tape, and return the sealed envelope to you to forward with your application. Please enter details of your referees below.

<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">Referee 1</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Status</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Address</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td style="border: 1px solid black; height: 20px;"></td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td style="border: 1px solid black; height: 20px;"></td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Telephone</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Fax</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>e-mail</td><td style="border: 1px solid black; height: 20px;"></td></tr> </table>	Referee 1		Status		Address						Telephone		Fax		e-mail		<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 15%;">Referee 2</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Status</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Address</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td style="border: 1px solid black; height: 20px;"></td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td style="border: 1px solid black; height: 20px;"></td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Telephone</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>Fax</td><td style="border: 1px solid black; height: 20px;"></td></tr> <tr><td>e-mail</td><td style="border: 1px solid black; height: 20px;"></td></tr> </table>	Referee 2		Status		Address						Telephone		Fax		e-mail	
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**12. Special needs**

Please give details of any disability or medical condition which might necessitate special arrangements or facilities. Candidates with dyslexia are asked to enclose with their application a copy of the most recent assessment of their dyslexia so that an evaluation of their needs can be made. Please also complete the enclosed equal opportunities monitoring form.

**13. Financial and employer support**

Please indicate how you intend to finance the costs of the programme by providing satisfactory written evidence, for example in the form of a letter from your employer or sponsoring organisation (including a purchase order if possible), that they will be funding the programme fees and other expenses. If you are self-funded, please include a letter or statement from your bank or building society that shows you are able to finance the costs of the programme.

**14. Source of information**

Where did you first hear about the programme?

**15. Ethnic origin**

Please complete the enclosed equal opportunities monitoring form and return it with your application.

**16. Acknowledgement**

If you wish receipt of your application to be acknowledged, please complete a self-addressed card or sealed envelope (at least 16cm by 11cm) and return it with your application.

**17. Checklist** Before sending us your application, please check you have included all relevant materials:

- (a) two confidential references in sealed envelopes;
- (b) a copy of degree certificate(s), transcript(s) and/or official award letter(s);
- (c) evidence of funding;
- (d) an English language test score report (IELTS, TOEFL or Cambridge Certificate of Proficiency in English) (*where required*);
- (e) the equal opportunities monitoring form;
- (f) an acknowledgement card (*if you wish receipt of your application to be acknowledged*).

We will be unable to consider your application unless items 17a and 17c and, where applicable, items 17b and 17d are enclosed with your application.

**18. Declaration**

I certify that the particulars given on this application form are true.

Signature	
Name in full (block letters)	
Date	

Thank you for completing this form. Please send it, along with accompanying material to:  
**Programme Administrator, Distance Learning Programmes in Health Economics, Department of Economics and Related Studies, University of York, Heslington, York YO10 5DD.**  
 We will try to tell you whether your application has been successful within 4 weeks of receipt. Should you wish to contact us write to the above address, telephone +44 (0)1904 323790 or e-mail [healthecon@york.ac.uk](mailto:healthecon@york.ac.uk).

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HEALTH CARE PROFESSIONALS

POSTGRADUATE CERTIFICATE AND DIPLOMA PROGRAMMES BY DISTANCE LEARNING

*Academic reference*

Applicant's name:

**To the applicant**

You must enclose, with your completed application, confidential references from two academic referees. Please give or send a copy of this sheet to each of your referees, and ask for a confidential reference to be returned to you in a signed and sealed envelope. You should then return the sealed envelopes with your completed application form to the address noted on the application form.

**To the referee**

Please supply a confidential reference in English on the above-named applicant's suitability, on both academic and general grounds, to study for the programmes in *Health Economics for Health Care Professionals* at the University of York. If his/her first language (or language of previous university-level instruction) is not English, do you consider his/her command of English to be adequate for postgraduate study?

If possible, please provide details of the result he/she has obtained in degree examinations thus far and (if he/she has not yet graduated) a prediction of the likely degree result. If the grading system is different from that used in British universities, please provide a brief explanation of the grading system used. Please include a note of your name, status/title, and telephone/fax number, and the name and address of your university/institution. References must be submitted on official headed paper.

Please place your completed reference in an envelope, seal the envelope, sign across the seal, and cover your signature with clear adhesive tape, before giving the envelope to the applicant for forwarding with the application.

Thank you for providing the reference.

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*Equal opportunities monitoring*

The University of York is committed to a policy of equal opportunities. To enable the University to monitor the effectiveness of this policy, applicants are asked to complete this monitoring form. This information is used solely for the purpose of monitoring application and admission rates and forms no part of the selection procedure. Please return the form with your application. The monitoring form will be separated from the application form upon receipt and forwarded to the Graduate Schools Office.

**Ethnic Origin**

Please tick the box which you feel most adequately describes your ethnic origin.

**Disability**

If you have a disability and may require extra support whilst at University as a consequence, please tick the relevant box(es) in the section below. **Please give full details of your special needs in section 12 of the application form.**

If you have no special needs arising from a disability (eg you have a visual impairment which is corrected by spectacles), please tick 'no known disability'.

If you are a **registered** disabled person, please tick the final box in the disability section to indicate this.

**Ethnic origin**

- 10 White
- 21 Black Caribbean
- 22 Black African
- 29 Black other
- 31 Indian
- 32 Pakistani
- 33 Bangladeshi
- 34 Chinese
- 39 Asian other
- 80 Other
- 98 Information refused

**Disability**

- 0 No known disability
- 1 Dyslexia
- 2 Blind/partially sighted
- 3 Deaf/hearing impairment
- 4 Wheelchair user/mobility difficulties
- 5 Need personal care
- 6 Mental health difficulties
- 7 Unseen disability (eg asthma, diabetes, epilepsy)
- 8 Multiple disabilities
- 9 Disability not listed above
- I am a registered disabled person