

Application Form

Postgraduate Certificate in Professional Practice in Architecture 2015 -16



Institute of Continuing Education

SECTION A: Personal details

A(1) Personal details

Name (this should be your legal name)
Please note that this will appear on your certificate and transcript

Name (previous)
If you used a different name during previous study at ICE or the University of Cambridge in general, please include it here. (This includes variations such as shortened names)

Last (family) <input style="width: 95%;" type="text"/> First <input style="width: 95%;" type="text"/> Middle names <input style="width: 95%;" type="text"/> Title (Mr/Mrs/Miss/Dr etc) <input style="width: 95%;" type="text"/>	Last (family) <input style="width: 95%;" type="text"/> First <input style="width: 95%;" type="text"/> Middle names <input style="width: 95%;" type="text"/> Title (Mr/Mrs/Miss/Dr etc) <input style="width: 95%;" type="text"/>
--	--

Please quote Student Identifier number if known

Date of Birth Nationality and residence

<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center;"> <input style="width: 90%; height: 20px;" type="text"/> DD </td> <td style="width: 33%; text-align: center;"> <input style="width: 90%; height: 20px;" type="text"/> MM </td> <td style="width: 33%; text-align: center;"> <input style="width: 90%; height: 20px;" type="text"/> YYYY </td> </tr> </table> <p>Sex <input type="checkbox"/> Male <input type="checkbox"/> Female </p>	<input style="width: 90%; height: 20px;" type="text"/> DD	<input style="width: 90%; height: 20px;" type="text"/> MM	<input style="width: 90%; height: 20px;" type="text"/> YYYY	Country of permanent residence <input style="width: 95%; height: 20px;" type="text"/> Country of birth <input style="width: 95%; height: 20px;" type="text"/> Nationality <input style="width: 95%; height: 20px;" type="text"/> Any second nationality <input style="width: 95%; height: 20px;" type="text"/>
<input style="width: 90%; height: 20px;" type="text"/> DD	<input style="width: 90%; height: 20px;" type="text"/> MM	<input style="width: 90%; height: 20px;" type="text"/> YYYY		

Have you been ordinarily resident in the EEA (EU, plus Iceland, Lichtenstein and Norway) or Switzerland for 3 years prior to the first day of your course? [Note: if the purpose of your residency has been to receive full education at any point in the 3-year period please answer No]
 Yes No

Are you a Swiss or European Economic Area (EEA) national living and working in the UK? Yes No

Are you a non-UK/EU national who is a family member of an EU national? Yes No

Are you a non-UK/EU citizen settled in the UK? Yes No

Do you require a visa to study in the UK? Yes No

See www.ice.cam.ac.uk/studying-with-us/international-students

Current UK visa status, if applicable

A(2) Contact Information

	Mailing Address	Home (permanent) Address (if different)
Number/street	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Town or city	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
County/province/state	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Postal code	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
Country	<input style="width: 95%; height: 20px;" type="text"/>	<input style="width: 95%; height: 20px;" type="text"/>
	This address is valid until: <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> DD/MM/YYYY	I have lived at this address since: <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> <input style="width: 40px; height: 20px;" type="text"/> DD/MM/YYYY

Email Address

Please write very clearly, booking/payment confirmations and course materials will be sent to this address and it will be used as a login for those courses with access to the Virtual Learning Environment

Day-time telephone number, with country code where relevant

SECTION B: Programme of Study

B1 Qualifications

All applicants must provide copies of any degree certificates or ARB letters. I understand that the Department of Architecture will verify my qualifications. We will request that the academic institutions confirm your qualifications.

Higher Education:

State type of degree including grade or class of degree _____

Institution _____ Date of award _____

Part 1 Qualification:

Part 2 Qualification:

Course dates:

Course dates:

Date of qualification:

Date of qualification:

School:

School:

Please give details if your qualifications have been assessed as "Equivalent" by the ARB:

B2 Professional Experience

Post Part 1

Do you have a record of your professional experience?

Is this: A PEDR or other record (give details)?

Was this document signed by your: Office Mentor PSA

Please give details of all professional experience positions held after your Part 1 qualification (*please continue on a separate sheet if required*):

Start date: _____ End date: _____

Practice name and address:

Any relevant details of your time there:

Total in months:

Post Part 2

Do you have a record of your professional experience?

Is this: A PEDR or other record (give details)?

Was this document signed by your: Office Mentor PSA

Please give details of all professional experience positions held after your Part 1 qualification (*please continue on a separate sheet if required*):

Start date: _____ End date: _____

Practice name and address:

Any relevant details of your time there:

Total in months

Covering Letter

In addition to the information requested within this form, applicants for 2015-16 are asked to submit a covering letter. This letter should explain, in NO MORE THAN ONE SIDE OF A4, why they feel they are ready to complete the Part 3 qualification and why they feel they would be suitable for this particular course.

SECTION C: English Language Proficiency

All teaching and assessment on this course is in English. To participate fully, you will need near-native fluency in both spoken and written English.

For students for whom English is not their first language, we will require evidence of having met the Institute's required level in a recognised test. Further information regarding the required level can be found on our website (www.ice.cam.ac.uk/studying-with-us/international-students)

We will ask for recent certification as part of the application process.

If English is not your first language, have you taken an English language proficiency test in the last two years and achieved the required level in the same sitting?

Yes IELTS Please enter your TRF number

Yes TOEFL Please enter your registration number

No current language proficiency test. I agree to send my English proficiency test results or reference details to the **Department of Architecture by 01 June 2015**. Your place on the course cannot be guaranteed until satisfactory evidence of your language proficiency has been received.

SECTION D: Support needs relating to disability or chronic illness

Under the Equality Act 2010, a disability is defined as a physical and mental impairment which has substantial and long term adverse effect on any individual's ability to carry out normal day to day activities. We invite disclosure from anyone who feels they may have a disability or other condition which is likely to require additional support during their time on the course.

Do you have any additional needs in relation to your learning or access to this course, that you would like us to help you with, if we are able to do so? Yes No

If applicable, please specify your additional needs, e.g. induction loop, large print, wheelchair access:

Please can we have your permission to pass on this information to the appropriate people (i.e. course administrator or tutor)? Yes No

If you have any questions or need any particular support that you would like to talk to us about please contact the Part 3 Administrator in the first instance at partiii@aha.cam.ac.uk or the ICE Disability Adviser at studentsupport@ice.cam.ac.uk

SECTION E: HESA information

For our statistical returns to the Higher Education Statistics Agency (HESA) we need to ask the following questions of students who are studying for credit. We cannot process your application without this information. If you do not complete this section you will be required to answer these questions at a later date. For more information about HESA see www.hesa.ac.uk. Sensitive information will be used by the University to generate anonymised statistics which will never be presented in a form that allows individuals to be identified.

Please note: we may need to contact you further information in order to complete our statutory returns to the Higher Statistics Agency (HESA))

Please tick the appropriate box below. If you do not have a disability, special needs or a medical condition, use code 00 ('I have no disability'). If you do not wish to provide any information in this section, use code 97 ('Information refused').

By completing this section you may be put in contact with the Disability Advisor to establish what support, if any, is required to enable you to study effectively.

<input type="checkbox"/> I have no disability (00)	<input type="checkbox"/> I have a long standing illness or health condition such as cancer, HIV, diabetes, chronic heart disease, or epilepsy (54)	<input type="checkbox"/> I am blind or have a serious visual impairment uncorrected by glasses (58)
<input type="checkbox"/> I have two or more impairments and/or disabling medical conditions (08)	<input type="checkbox"/> I have a mental health condition (e.g. depression/schizophrenia/anxiety disorder) (55)	<input type="checkbox"/> I have a disability, impairment or medical condition not listed above (96)
<input type="checkbox"/> I have a Specific Learning Difficulty (e.g. Dyslexia/Dyspraxia/AD(H)D) (51)	<input type="checkbox"/> I have a physical impairment or mobility issues (e.g. difficulty using arms/using a wheelchair or crutches) (56)	<input type="checkbox"/> Information refused (97)
<input type="checkbox"/> I have a social/communication impairment such as Asperger's syndrome/other autistic spectrum disorder (53)	<input type="checkbox"/> I am deaf or have a serious hearing impairment (57)	

If you have indicated that you have a disability, special needs or medical condition, please indicate whether or not you will be in receipt of Disabled Students' Allowance for the purpose of studying this course. Disabled Student's Allowances (DSAs) provide extra financial help if you want to study a higher education course and have a disability, on-going health condition, mental health condition or specific learning difficulty like dyslexia. See www.direct.gov.uk Yes No

Ethnic origin

Please tick the appropriate box to indicate your background. If you do not wish to provide information in this section, tick the 'Information refused' box

<input type="checkbox"/> White (10)	<input type="checkbox"/> Other Asian background (39)
<input type="checkbox"/> Gypsy or Traveller(15)	<input type="checkbox"/> Mixed-White and Black Caribbean (41)
<input type="checkbox"/> Black or Black British – Caribbean (21)	<input type="checkbox"/> Mixed-White and Black African (42)
<input type="checkbox"/> Black or Black British – African (22)	<input type="checkbox"/> Mixed-White and Asian (43)
<input type="checkbox"/> Other Black background (29)	<input type="checkbox"/> Other Mixed background (49)
<input type="checkbox"/> Asian or Asian British – Indian (31)	<input type="checkbox"/> Arab (50)
<input type="checkbox"/> Asian or Asian British – Pakistani (32)	<input type="checkbox"/> Other Ethnic background (80)
<input type="checkbox"/> Asian or Asian British – Bangladeshi (33)	<input type="checkbox"/> Not known (90)
<input type="checkbox"/> Chinese (34)	<input type="checkbox"/> Information refused (97)

Previous study

Do any of your parents (natural or adoptive parents, step-parents or guardians, who have brought you up) have any higher education qualification such as degree, diploma or certificate of higher education? (This question is asked to monitor the encouragement of widening participation in higher education) Yes No Do not know Information refused

Please indicate the highest qualification that you currently hold, e.g. A-levels, Highers, first Degree, Masters:

Please indicate the type of educational institution you most recently attended:

UK State School UK independent school UK FE College Any non-UK institution UK Higher Education Institution

If you indicated that you have attended an UK Higher Education Institute, please indicate which one:

External Funding

Please state the source of funding if your fees are being completely or partially funded from another source

If your employer is paying all or part of your fee, is your employer:

An SME (Small to medium sized enterprise) Other commercial business Third sector organisation

SECTION F: Marketing

How did you hear about us?

- | | |
|--|--|
| <input type="checkbox"/> Attended previous course | <input type="checkbox"/> Flier |
| <input type="checkbox"/> ICE course brochure | <input type="checkbox"/> Advert |
| <input type="checkbox"/> ICE website (www.ice.cam.ac.uk) | <input type="checkbox"/> Newspaper or magazine article |
| <input type="checkbox"/> Internet search engine | <input type="checkbox"/> Other |
| <input type="checkbox"/> Personal recommendation | |

Please give details of which advert, website, search engine or other method you found us through:

Would you be happy to receive occasional marketing information about our activities? By e-mail: Yes No
By post: Yes No

This information will be added to our internal database and may be used to inform you of future activities, events and courses held by the Institute of Continuing Education. We will not share these details with any third party without your permission. The Institute is included in the University of Cambridge's notification to the Information Commissioner's Office, as required under the Data Protection Act 1998.

SECTION G: University services

University card and library access

Students studying for a qualification that is at least one academic year in length are eligible for a University card (www.admin.cam.ac.uk/offices/misd/univcard/whatis/) which will also give students full access to the resources of the University Library (www.lib.cam.ac.uk/students/)

Please supply two recent passport sized photographs of yourself for your University student card which will also act as your University Library card. Post to the Part 3 Administrator at the address at the end of this form.

SECTION H : Payment

The full cost of the course is £2350 (including a registration fee of £250). If you are not accepted on the course then your registration fee will be refunded. If you are accepted on the course and withdraw, the registration fee is withheld.

WHERE POSSIBLE PLEASE PAY BY CHEQUE

If you are unable to do this please use the Bank Transfer details below. Unfortunately we cannot accept payment by credit card.

I enclose a cheque made payable to "University of Cambridge" for one of the following:

- full course fee - **£2350**
 registration - **£250** (balance to be paid by 31 July 2013)

PLEASE QUOTE 'P3 ARCH' IN THE REFERENCE FIELD FOLLOWED BY YOUR SURNAME e.g. 'P3 ARCH LUXON'

Account Name: University of Cambridge

Account Number: 10921084

Sort Code: 20-17-19

Bank: Barclays Bank plc
9 – 11 St Andrews Street, Cambridge, CB2 3AA
UNITED KINGDOM

Swift Code: BARCGB22

IBAN Number: IBAN GB96 BARC 2017 1910 9210 84

PLEASE QUOTE 'P3 ARCH' IN THE REFERENCE FIELD FOLLOWED BY YOUR SURNAME e.g. 'P3 ARCH LUXON'

The final date for submission of application forms is 01 June. Due to the high number of applications received, candidates are advised to apply before the June deadline. The full balance of fees are to be paid by 31 July.

Data will be processed for the purposes of education administration, including equal opportunities monitoring and to make returns to the Higher Education Statistics Agency. The data controller is the University of Cambridge, whose representative is the University Data Protection Officer, The Old Schools, Trinity Lane, Cambridge, CB2 1TN. For further information go to www.ice.cam.ac.uk/studying-with-us/information-for-students/your-personal-information

By booking on a course with us you will be deemed to have accepted the terms and conditions and cancellation and refund policy of the University of Cambridge Institute of Continuing Education available on request or from our website at www.ice.cam.ac.uk/studying-with-us/information-for-students

If, in the reasonable opinion of ICE, the presence of any client, tutor, student or delegate is, or is deemed likely to be, an impediment to the provision of any service of ICE, or brings ICE (and/or the University of Cambridge) into disrepute, ICE may exclude such person from all or part of the service. In these circumstances ICE will return any fee paid by or for the individual, but there will be no further liability of the Institute.

Whilst every effort is made to avoid changes to the programme, published details may be altered without notice at any time. The Institute reserves the right to withdraw or amend any part of this programme without notice.

For a full explanation of Institute policies see www.ice.cam.ac.uk/studying-with-us/information-for-students

Signature _____ Date _____

Please return this form with the required payment to:

**Sue Luxon
University of Cambridge
Department of Architecture
1-5 Scroope Terrace
Trumpington St
Cambridge CB2 1PX**

email: partiii@aha.cam.ac.uk

Enclosure Checklist

Please confirm that you have included the following items:

- Completed application form
- Two passport sized photographs
- Copies of your degree certificates and any ARB letters
- Covering letter
- Course fee or registration fee

Please return your completed application by 01 June 2015 at the very latest – please note that course accepts applications from 01 February 2015