## **Student Registration Form**



Please refer to the associated guidance notes when completing this form.

Section 1 - <b>Personal Details</b>					
Title					
Forenames					
Family name / Last Name					
Section 2 - Contact Det	ails				
Home Address (please prov	ride your address in your co	ountry of permanent residence)			
Home Postcode					
Home Telephone					
Mobile Telephone					
Email					
Correspondence address (if	different from your Home a	address)			
Section 3 - <b>Further Det</b>	ails				
Section 5 Turcher Bec					
Date of birth	Gender I	dentity			
De veu beve e disphilibu en neguine en comment de suite en esta 2					
Do you have a disability or require any support requirements?					
Section 4 - <b>Course Deta</b>	nils				
What course are you intending to study at Nottingham Trent University?					
what course are you intend	ng to study at Nottingham	Trent University?			
What mode of study are you	ı intending to study by?				
Part-time	Full-time	Sandwich course			
Exchange	Short Course	Distance Learning			
	SHOLL COULSE	2.3tarioc Learning			
Expected Start date					

Country of Birth				
Ethnicity				
Nationality				
What is your country of permanent (home) residence?				
What is your country or permanent (nome) restaurice:				
Section 6 - Current / Most Recent Studies				
What institution are your currently attending or provide details of the last institution you attended?				
What course are you currently studying or confirm the name of the last course attended?				
Does this course have a formal arrangement with NTU?				
Section 7 - Other Details				
Residential Category				
Do you require a visa to study in the UK?  Yes  No				
What type of visa do you intend to use to study in the UK?				
What type of visa do you intend to use to study in the UK?  Have you ever studied in the UK previously? Yes No				
Have you ever studied in the UK previously? Yes No				
Have you ever studied in the UK previously? Yes No  Please confirm your passport number				
Have you ever studied in the UK previously? Yes No  Please confirm your passport number  I have attached a copy of my passport				

Section 8 - Criminal Conviction			
Do you have a criminal conviction?	Yes	No	
Signature		-	

Please read the following carefully;

General Data Protection Regulation 2016 and Data Protection Act 2018

By submitting this application form you are consenting to Nottingham Trent University using the information you have provided to enable your application for entry to be considered. Please see our <u>Admissions Privacy Notice</u> which sets out how we use your personal data.

## Terms and Conditions

Should you accept an offer to study at the University, you will be agreeing to the <u>Terms and Conditions</u> which includes the Student Privacy Notice.

The Admissions Policy forms part of the University Academic Standards and Quality Handbook.



## Continuing Professional Development Courses NTU/PG Cert Clinical Education

## Agreement between the Student and Nottingham Trent University for information sharing

Nottingham Trent University is the "Data Controller" for the purposes of the UK General Data Protection Regulation 2016 and the Data Protection Act 2018. As a Student whose studies are sponsored, your Agency Sponsor has requested the University share information about you in relation to your attendance and performance on your Course (or module).

As you are undertaking a professional development course, in addition to information about your attendance and performance, your Agency Sponsor has requested that the University share with them information about any concerns that may arise in relation to your practice, academic work or conduct whilst undertaking the course (or module). Such information may (but is not limited to) include the University providing information or copy letters which contain your home address (as registered with the University). Please note that should the University have any concerns in relation to your practice, academic work or conduct whilst undertaking the course, these concerns will firstly be discussed with you before any contact is made with your Agency Sponsor. You should also note that significant concerns dealt with under the University's Fitness to Practice Procedure may be passed onto the GMC.

Please see the University Privacy Notice for Students available on our website at: https://www.ntu.ac.uk/about-us/governance/information-governance.

By signing the form below you are providing your consent to the processing of your personal data for the purposes of information-sharing with your Agency Sponsor.

Student Name:	
Name of Sponsor Agency:	
Sponsor Agency email address:	
Sponsor Agency Contact Name:	
NTIL Co-ordinator Name:	

I agree to Nottingham Trent University sharing with my Agency Sponsor information regarding my studies in addition to information about my attendance and progress on the course (or module) and any concerns about my practice or fitness to practice as set out above.

NTU Co-ordinator email address:

Signature	Print Name	Date