



Application Form

Please type or print in black ink and complete in BLOCK CAPITALS if hand-written.

Please submit a copy of your most recent CV, Job description and any certificates for qualifications previously achieved as part of the application process.

Personal Information (for name, please state this as it appears on your passport) (REQUIRED)

Title (e.g. Mr./Miss/Mrs.):	Forename(s):
Surname:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Any other names previously known by:	
Date of birth:	National Insurance No:
Unique Learner Number (ULN) (if known):	Primary phone number (mobile):
Preferred email address (personal or work):	
Home address (where living at the start of the Apprenticeship):	
Country:	Postcode:
How long have you lived at the above address?	

Emergency Contact Details (REQUIRED)

Please fill this out so that we know whom to contact in the event of an emergency.	
Full name:	Relationship:
Address:	
Phone number:	



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Course location applied for (REQUIRED)		
Intake year	2 0 _ _	
Intake month	<input type="checkbox"/> Jan <input type="checkbox"/> April <input type="checkbox"/> July <input type="checkbox"/> Oct	
Programme	Level	Location
<input type="checkbox"/> BSc (Hons) Cyber Security Technical Professional	<input type="checkbox"/> 4	<input type="checkbox"/> Online
<input type="checkbox"/> BSc (Hons) Digital User Experience	<input type="checkbox"/> 5	<input type="checkbox"/> London
<input type="checkbox"/> BSc (Hons) Project Management	<input type="checkbox"/> 6	<input type="checkbox"/> Birmingham
MSc Digital and Technology Specialist:	<input type="checkbox"/> 7	<input type="checkbox"/> Manchester
<input type="checkbox"/> (Software Engineering)		<input type="checkbox"/> Leeds
<input type="checkbox"/> (Data & Analytics)		<input type="checkbox"/> Newcastle
<input type="checkbox"/> (Enterprise Architecture)		<input type="checkbox"/> Bristol
<input type="checkbox"/> (Cyber Security)		
<input type="checkbox"/> (IT Operations Management – Cloud Computing)		
<input type="checkbox"/> (IT/Digital Futures - DevOps)		

Personal statement:

(please use a minimum of 250 words detailing your reasons for applying for this programme, explaining your choice of course, what you hope to do in your future career and how the course is relevant to your plans.)



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**Personal statement: Employer/company contact details (where apprenticeship will be undertaken)
 (REQUIRED)**

Please provide the name and details of your employer where the apprenticeship will be undertaken.

Employer / company name:			
Employer Address (workplace location):			
Telephone:		Employer email address:	
Your employee email address:			
Line manager name:		Line manager email address:	
Line manager telephone number:		Start date with current employer:	
Start date in role (where apprenticeship will be undertaken)		Line Manager current job title:	



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Contracted hours per week (do not include paid or unpaid overtime):	
Do you spend at least 50% of your working hours in England?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Employment history

Please summarise below and attach a full CV/resumé with details of previous employment, the positions you have held, the nature of your work and your duties.

Name of employer/organisation	Nature of work	From [MM/YY]	To [MM/YY]	Part-/Full-time

Disability, Medical Conditions or Learning Support (REQUIRED)

QA encourage you to disclose any disability/medical condition or other need which could impact your ability to study. This information does not affect our decision to offer you a place. By providing this information on your application form, our support teams can assess if we need to provide further support to you. Please tick all that apply:

No Disability	<input type="checkbox"/> 0	Learning Difficulty	<input type="checkbox"/> 1
Blind / Serious Visual Impairment	<input type="checkbox"/> 2	Deaf / Serious Hearing Impairment	<input type="checkbox"/> 3
Wheelchair User / Mobility Issues	<input type="checkbox"/> 4	Personal Care Support	<input type="checkbox"/> 5



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Mental Health Condition	<input type="checkbox"/> 6	Unseen Disability: e.g. Diabetes	<input type="checkbox"/> 7
Autistic Spectrum/Asperger's	<input type="checkbox"/> 8	Other disability not listed here	<input type="checkbox"/> 9
Please detail other disability or additional support needs:			

Safeguarding Questions (REQUIRED)		
Since the age of 14, have you been under the care of a Local Authority for a period of more than 13 weeks?	Yes	No
Do you (or have you had) a Statement of Special Educational Needs (SEN) including and Education Health Care Plan (EHCP)?	Yes	No



Residential Information (REQUIRED)

Please provide information relating to your nationality, residence, identity. Attach copies of identity confirmation (Passport, etc.) plus any pertinent Home Office documentation. Further information may be requested.

Q1. Have you lived continuously in the UK (including British Overseas Territories or Crown Dependencies) Gibraltar or the EEA for at least the previous 3 years: Yes No

Where answered No: Indicate your date of arrival into the UK (including British Overseas Territories or Crown Dependencies) Gibraltar or the EEA: _____

Q2. All Applicants: pick the relevant statement from the options below (A-O) (one only):

Are you:

- A. A UK or Irish national (or)
- B. EEA National living in the UK (with pre-settled or settled status under the EU settlement Scheme) (or)
- C. A person with the Right of abode in the UK (or)
- D. A non-UK national who has permission granted by the UK government to live in the UK and such permission is not for educational purposes only (or)
- E. A non-UK national who is also a non-EEA national and has obtained pre-settled or settled status under the EU settlement scheme.
- F. A non-UK national who has received a Student visa (Student route visa or Tier 4 or Tier 2)

Where you have ticked A-E what is your:

Nationality (as on passport): _____

Passport Number: _____

For UK nationals with no passport: What other documentation do you have to prove your identity: _____

Identification number on document: _____

- G. Refugee Status
- H. Discretionary leave to enter or remain
- I. Exceptional leave to enter or remain
- J. Indefinite leave to enter or remain
- K. Humanitarian protection
- L. Leave outside the rules
- M. Afghan locally engaged staff under the intimidation policy
- N. The husband, wife, civil partner or child of any of the above
- O. Section 67 of the immigration act 2016 leave
- P. Calais leave to remain

Where you have ticked F-O what is your:

Nationality (as on passport / Visa): _____

Passport / Visa Number: _____

Comments: _____



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QA are required by the ESFA funding rules to confirm an apprentice's identity or immigration permissions. Copies of documentation provided to confirm the correct statement from A-0 has been selected by the applicant will not be retained by QA.

Previous education and training in the UK or overseas (including school, college, university or apprenticeship). (REQUIRED)

Please outline your previous school, college, education and qualification history, starting with your most recent education. This should include all secondary education onwards studied in the UK or overseas, including study that was not completed.

From	To	Institution	Qualification Level (i.e. GCSE, A level)	Qualifications and Grades Achieved

Highest qualification previously achieved (REQUIRED)

Please enter your highest level of education e.g. A levels/BSc/MSc: _____

Title (name) of the highest qualification previously achieved: _____

If this award was taken in the UK enter institution name: _____

If taken elsewhere please enter name and country: _____

Previous Apprenticeship (REQUIRED)

Have you previously commenced or completed an Apprenticeship?

Yes

No

If Yes, please provide the title and level:



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If Yes, did you achieve the apprenticeship?

Additional training (IF APPLICABLE)

Please list below any additional training, skills or certifications you have completed that you would like to be considered with your application.

Subject	Organisation	Completion date (MM/YY)

Previously attained qualifications in English (IF APPLICABLE)

Have you previously studied English at GCSE / A Level (or above) or equivalent (i.e. Functional Skill)? Please refer to the [ESFA's list of acceptable current and prior qualifications](#). **If yes, please provide details below:**

Qualification name:

Grade:

Year completed:

Previously attained qualifications in Mathematics (IF APPLICABLE)

Have you studied Mathematics at GCSE / A Level (or above) or equivalent (i.e. Functional Skill)? Please refer to the [ESFA's list of acceptable current and prior qualifications](#).

If yes, please provide details below:

Qualification name:

Grade:

Year completed:



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Checklist:

Please tick the boxes to confirm which copies of the following documents you have sent with your application.

Copy of passport / Identity	<input type="checkbox"/> Yes
Proof of Residency Status (IF REQUIRED)	<input type="checkbox"/> Yes
Copy of previous qualifications, including final certificates and transcripts, translated into English (if not in English)	<input type="checkbox"/> Yes
Employer details	<input type="checkbox"/> Yes
Resume/Curriculum Vitae/ Job Description (REQUIRED)	<input type="checkbox"/> Yes



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Declaration:

I confirm that I understand and agree to the following:

- The information given on this form is correct and complete and that I have completed this form myself.
- I accept QA Limited has the right to cancel my application if it is found that I have provided false or inaccurate information.
- that by submitting my information I am consenting to QA acting as data controller and processing my personal data for educational purposes under the provisions of the General Data Protection Regulations (GDPR). I understand that my information may be shared with 3rd parties (for example information systems) for the sole purpose of facilitating my application to study.
- That if I wish to opt-out of communications from QA at any point I can do so by writing to QA Higher Education, 5th Floor, 5-7 Hill Street, Birmingham, B5 4UA or emailing QAHE.Marketing@qa.com.

Signed:

Date:



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Ethnic Origin/Equal Opportunities Monitoring (REQUIRED)

QA are committed to providing equal opportunities for all. To assist us with our monitoring please choose one option to indicate your ethnic group.

This information will not be considered as part of the admissions process.

English / Welsh / Scottish / Northern Irish / British		Any Other Mixed / Multiple Ethnic Background		Caribbean	
Irish		Indian		Any Other Black / African / Caribbean Background	
Gypsy or Irish Traveller		Pakistani		Arab	
Any Other White Background		Bangladeshi		Any Other Ethnic Group	
White and Black Caribbean		Chinese		Not Provided	
White and Black African		Any Other Asian Background			
White and Asian		African			