



Application for Entry to the Scheme at Postgraduate/Masters Level

Please ensure that all sections are completed **as fully as possible**, using BLOCK CAPITALS for pages 1 to 3.

A PERSONAL

Title	<input type="text"/> (Mr/Mrs/Miss/Ms/Dr)	Surname	<input type="text"/>
First Names	<input type="text"/>		
Previous Surname	<input type="text"/>	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>
Home Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Post Code	<input type="text"/>
Home Telephone No.	<input type="text"/>	Gender: Male	<input type="checkbox"/> Female <input type="checkbox"/>
Home email	<input type="text"/>		
Where did you see this advertisement	<input type="text"/>		

B YOUR CHOICE OF PATHWAY AND ATTENDANCE

PgCert	<input type="checkbox"/>	PgDip	<input type="checkbox"/>	MA/MSc	<input type="checkbox"/>	Year of Start	<input type="checkbox"/>
Multimedia & E-Learning	<input type="checkbox"/>	Religion and Education in Contemporary Society	<input type="checkbox"/>				
Professional Development	<input type="checkbox"/>						

For the Professional Development Pathway please indicate your choice of route and also complete the QTS and DFEE No.

Education Management	<input type="checkbox"/>	Post Comp Ed & T	<input type="checkbox"/>	Action Research	<input type="checkbox"/>
Disability Studies	<input type="checkbox"/>	Basic Skills	<input type="checkbox"/>		
QTS	<input type="checkbox"/> Y <input type="checkbox"/> N	DFEE No.	<input type="text"/>		

C PRESENT POST

Present Post	<input type="text"/>	Grade	<input type="text"/>
Full-Time/Part time	<input type="checkbox"/> <input type="checkbox"/>	Number of Years in this Post	<input type="text"/>
Name of Organisation	<input type="text"/>		
Head of Organisation	<input type="text"/>		
Address	<input type="text"/>		
	<input type="text"/>		
	<input type="text"/>	Post Code	<input type="text"/>
Telephone No.	<input type="text"/>		
Work email	<input type="text"/>		
Your Main Specialism (s)	<input type="text"/>		

D REFEREE (who *must* be able to comment on your suitability for your chosen pathway in Education)

Use the Employer given at C **or** use the referee given below

Name of Referee Position

Address

 Post Code

Telephone No.

E PREVIOUS EMPLOYMENT (*most recent first*)

Name of Employer	Type of Occupation	Full or Part-Time	From	To

F POST-16 EDUCATION (*most recent first*)

School/College/University	From	To	Subjects Studied	Full or Part-Time

G ENTRY QUALIFICATION *Detail the qualification(s) that provide entry to the Pathway, probably your degree. We will want to see the **originals** of these Certificates*

Qualification	Subject(s)	Awarded By	Date	Grade	Seen

H OTHER QUALIFICATIONS

Qualification	Subject(s)	Awarded By	Date	Grade

I EXAMINATIONS FOR WHICH YOU ARE NOW WORKING

Examining Body	Course/Subject	Stage	Exam Date

J MEMBERSHIP OF PROFESSIONAL BODIES

Professional Body	Details of Membership	From	To

K PERSONAL STATEMENT

Include here any further information which you believe to be pertinent to your application. Please include brief details of any claim you want to make for the accreditation of your prior learning.

L DECLARATION

Please ensure that this declaration is signed and completed.

I certify that the information in this **Application** is correct.

Signature _____ Date ____/____/____

Return the completed form to School of Education and Professional Development, The University of Huddersfield, Queensgate, Huddersfield, HD1 3DH