

Application form must be completed in your own handwriting.

THE BEAUTY COLLEGE CALLINGTON

APPLICATION FORM

Course applied for NVQ level 2 / 3 (delete as appropriate)

Full name:

Date of birth:

Address:

Telephone number (home):

Mobile no:

Education

Schools attended from age 11 years	Date from	Date to	Examinations Subject	Level	Grade

Further Education

Place of Education	Date from	Date to	Type of training	Qualifications

Other relevant experience:

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Please explain your reasons for applying for a Beauty Therapy course?

It will be recommended that you engage in 8 hours of home study each week, including practising the skills you have learnt and reviewing the work completed in class.

How do you feel about home study (homework)?

Are you in good health?

YES/NO (delete as appropriate)

Do you suffer from any of the following?

	YES	NO
Back problems		
Asthma or breathing		
Problems with		
Hearing difficulties		
Epilepsy		
Leg or arm problems		
Heart problems		
Migraine		
Other health problems		

Please give details if you answered YES to any of the above:

Special Educational needs Information

Do you have any special educational needs (e.g. Dyslexia)? YES/NO

Please give further details:

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Do you have a disability for which we may have to provide you with support?

YES/NO (delete as appropriate) If yes give details

Have you done any salon work experience? Give details

Have you completed a course of vocational training? Give details

Please give details on any interests or hobbies? Give details

Please provide a personal reference (not family member)

Name:

Address

Occupation:

Telephone number:

It is the policy to ensure equal opportunity for the advancement of all applicants and not to discriminate against any person because of race, colour, national origin, sex or marital status or disability.

Declaration: I confirm that the information given on this form is, to the best of my knowledge, true and complete.

Signature.....Date.....