

Build Your Own MA Short Courses

Application Form

This Application Form is for Build Your Own MA short courses which form part of the Media Short Course CPD Framework delivered by the Faculty of Media and Communication, Bournemouth University.

1. Personal details

The personal information you supply will not adversely affect your application for a place - see reference to our Equal Opportunities policy in the Personal Declaration section of this form.

Surname/Family Name

First name

Previous name (if changed)

Male/Female: Date of Birth (dd/mm/yy)

Correspondence address:

Postcode:

Correspondence address

Home address (if different)

Daytime telephone (inc. international/STD code)

Personal email address

Nationality (as on passport)

If you are a Non-UK National please enter your passport number and include a copy of your passport

Country of domicile or permanent residence

If you were not born in the UK, please state date of first entry into the UK:

Date from which you have been granted permanent residence:

Ethnicity

Please mark x in the appropriate box (this information is used solely for the purpose of the University's / training provider's Equal Opportunities monitoring and forms no part of the selection process):

Arab	<input type="checkbox"/>	Asian or Asian British - Bangladeshi	<input type="checkbox"/>	Asian or Asian British - Indian	<input type="checkbox"/>
Asian or Asian British - Pakistani	<input type="checkbox"/>	Black or Black British - African	<input type="checkbox"/>	Black or Black British - Caribbean	<input type="checkbox"/>
Chinese	<input type="checkbox"/>	Gypsy or Traveller	<input type="checkbox"/>	Mixed – White and Asian	<input type="checkbox"/>
Mixed – White and Black African	<input type="checkbox"/>	Mixed White & Black Caribbean	<input type="checkbox"/>	Other Asian background	<input type="checkbox"/>
Other Black background	<input type="checkbox"/>	Other ethnic background	<input type="checkbox"/>	Other mixed background	<input type="checkbox"/>
White	<input type="checkbox"/>	Information refused	<input type="checkbox"/>		

Disability or Additional Learning Need

Please mark x in the appropriate box (this information will be used for Equal Opportunities monitoring and for matters relevant to your support needs whilst studying):

No known disability	<input type="checkbox"/>	Information refused	<input type="checkbox"/>
Blind or have a serious visual impairment	<input type="checkbox"/>	Deaf or have a serious hearing impairment	<input type="checkbox"/>
Longstanding illness or health condition, e.g. cancer, HIV, diabetes, chronic heart disease or epilepsy	<input type="checkbox"/>	Mental health condition, e.g. depression, schizophrenia or anxiety disorder	<input type="checkbox"/>
Physical impairment or mobility issues; e.g. difficulty using your arms or using a wheelchair or crutches	<input type="checkbox"/>	Other disability, impairment or medical condition not listed	<input type="checkbox"/>
Two or more impairments and/or disabling medical conditions	<input type="checkbox"/>	Specific learning difficulty, e.g. dyslexia, dyspraxia or AD(H)D	<input type="checkbox"/>
Autistic disorder	<input type="checkbox"/>	Social / communication impairment, e.g. Asperger's syndrome / other autistic spectrum disorder	<input type="checkbox"/>

2. Short Course Information

Course Title:

Date of course (month/year):

Please indicate your reason for choosing the short course applied for, career aspirations and any other information, such as hobbies and interests that you wish us to know about when considering your application (maximum 300 words).

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Please tell us how you came to know about the course for which you are applying:

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Who is expected to pay your fees? Please mark x in the appropriate box:

Career Development Loan You Your employer Other sponsor

If you are likely to be sponsored by an employer or other organisation, please give the name and address of the sponsoring body, together with a contact name, telephone number, fax and email address:

Please indicate whether you have already attended a Build Your Own MA short course: Yes No

If no, please continue to **part 3** – Academic & Professional Qualifications.

If yes, please list other Build Your Own MA short courses you have taken, in chronological order:

Place of study	Course Title	Date taken (mm/yy)	Credits achieved

3. Academic & Professional Qualifications

Place of study	Qualification, Subject and Grade	Dates

4. Employment and Work Experience

Name of organisation	Position and nature of work	Part-Time /Full-Time	Dates

5. Referees

Please give names and addresses for two referees. These could be your current employer, a recent employer or a course leader / tutor from a university / college.

Name:	<input type="text"/>	Name:	<input type="text"/>
Job Title:	<input type="text"/>	Job Title:	<input type="text"/>
Address:	<input type="text"/>	Address:	<input type="text"/>
Telephone:	<input type="text"/>	Telephone:	<input type="text"/>
E-mail:	<input type="text"/>	E-mail:	<input type="text"/>

6. Personal Declaration

Equal Opportunities

The aim of the admissions process is to select students who have the ability and motivation to benefit from the programmes they intend to follow and who will make a contribution to the life of the university. The process takes place within the context of the university's Equal Opportunities policy which expresses the university's commitment to a comprehensive policy of equal opportunities for students in which individuals are selected and treated on the basis of their relevant merits and abilities and are given equal opportunities within the university. The aim of the policy is to ensure that no prospective student or enrolled Student should receive less favourable treatment on any grounds which are not relevant to academic ability or attainment. It is, however, important that these aims are achieved without prejudice to the safety and well-being of other members of the university community.

I have read and acknowledge Bournemouth University's [Dignity, Diversity and Equality Policy](#)

Criminal Convictions

You are asked to state whether or not you have any relevant criminal convictions. Relevant criminal convictions are only those convictions for offences against the person, whether of a violent or sexual nature, and convictions for offences involving unlawfully supplying controlled drugs or substances where the conviction concerns commercial drug dealing or trafficking. Convictions that are spent (as defined by the Rehabilitation of Offenders Act 1974) are not considered to be relevant and you should not reveal them.

You must enter x in the box if either of the following statements applies to you:

I have a relevant criminal conviction that is not spent

I am serving a prison sentence for a relevant criminal conviction

If you enter x in the box you will not be automatically excluded from the application process. However, we will want to consider your application further and may require further information before making a decision.

Data Protection Act 1998

I agree to Bournemouth University processing personal data contained in this form, and other data which the University may obtain from me or others, to deal with my application. The university may, if appropriate, forward my information to an official contracted partner of BU, in order that they can contact me to offer a pre-sessional course relevant to my status with BU. By submitting my application, I agree the university may also, where appropriate, contact the Home Office at any time, whether before, during or after my course, to request or supply further immigration information.

I agree that if my application is successful, the University may process my personal data as set out in the [data protection statement](#).

Personal Declaration

I confirm that by submitting the application form electronically, the information given in my application form is true, complete and accurate, and that no information requested or other material information has been omitted.

I undertake to be bound by all the [rules and bye-laws](#) in force under the Articles of Government of the University. I accept that, if I do not comply with these requirements, the University may cancel my application and any subsequent offer and I shall have no subsequent claim against the University.

Name:

Applicants signature:

Date (dd/mm/yy):

Completed applications should be returned to byoma@bournemouth.ac.uk

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