

# PRE-DOCTORATE AT KIC LONDON APPLICATION FORM

A PERSONAL DETAILS	
First name:	Family name (surname):
Middle names:	
Gender:	Date of birth (dd/mm/yyyy):
Nationality:	Passport number:
Secondary nationality (if applicable):	Secondary passport number (if applicable):
Have you been granted a visa to study in the UK before? Yes No If yes, please provide copies of all visas and CAS statements for any previous UK study.	Have you been refused a visa to study in any country? Yes (provide details) <input type="checkbox"/> No
Home address:	
Postcode:	Country:
Telephone:	Mobile:
Email:	

B EMERGENCY CONTACT (PARENT / GUARDIAN / NEXT OF KIN)	
Contact's name:	
Relationship to student (e.g. father):	Contact's gender:
Contact's address:	
Postcode:	Country:
Contact's telephone:	Contact's email:

C KIC LONDON PRE-DOCTORATE DETAILS	
Pre-Doctorate start date and year: September <input type="checkbox"/> October <input type="checkbox"/> February <input type="checkbox"/> May Year:	Do you need KIC London to arrange your accommodation for your Pre-Doctorate? Yes No
Do you need Preparatory English before your Pre-Doctorate? Yes No	You are not required to book accommodation at this stage.

D DOCTORAL DEGREE DETAILS	
Please choose your preferred university or universities for your doctoral degree: University of Aberdeen      Cranfield University University of Liverpool      University of the West of England, Bristol City, University of London	Type of doctoral degree that you wish to study: PhD      Professional Doctorate      Other (please specify below)
Preferred research area(s) for your doctoral degree:	

E PREVIOUS DOCTORAL DEGREE APPLICATIONS	
Have you previously applied for doctoral-level study in any country? Yes No	
If yes, please give details below (continue on a separate sheet if necessary). Please also attach your research proposals for these applications – these will help us support you when you apply for doctoral study in the future.	
Institution (name and country):	Date of application
Research area for which you applied:	What was the outcome of this application? Application rejected      Application accepted but offer declined Application accepted and considering offer      Decision pending
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### F ACADEMIC HISTORY

Please list all university-level qualifications, starting with your highest qualification (continue on a separate sheet if necessary). Please attach certified copies of your academic transcripts to your application, as well as certified translations if the transcripts are not in English.

Institution (name and country):	Dates attended (from – to):
Title of degree / qualification (e.g. MA, MSc, BA, BSc) including main subjects:	
Dissertation title (if any):	
Date (or expected date) of award:	Class / Division / Grade / GPA (or expected):
Institution (name and country):	Dates attended (from – to):
Title of degree / qualification (e.g. MA, MSc, BA, BSc) including main subjects:	
Dissertation title (if any):	
Date (or expected date) of award:	Class / Division / Grade / GPA (or expected):
Institution (name and country):	Dates attended (from – to):
Title of degree / qualification (e.g. MA, MSc, BA, BSc) including main subjects:	
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Date (or expected date) of award:	Class / Division / Grade / GPA (or expected):
Institution (name and country):	Dates attended (from – to):
Title of degree / qualification (e.g. MA, MSc, BA, BSc) including main subjects:	
Dissertation title (if any):	
Date (or expected date) of award:	Class / Division / Grade / GPA (or expected):

### G EMPLOYMENT HISTORY

Please list your current and / or recent work experience, starting with your most recent position (continue on a separate sheet if necessary).

Employer name and address:			
Dates of employment (from – to):	Type of employment:	Full-time	Part-time
Job title / position held:			
Main responsibilities:			
Employer name and address:			
Dates of employment (from – to):	Type of employment:	Full-time	Part-time
Job title / position held:			
Main responsibilities:			

### H ENGLISH LANGUAGE

Have you taken a Secure English Language Test?    Yes    No    If yes, please give details of your most recent test below and attach a certified copy of the test result.

Full name of test:			
Date taken (dd/mm/yyyy):	Overall score:		
Speaking score:	Listening score:	Reading score:	Writing score:

**I RESEARCH AREA AND BACKGROUND**

Please describe your proposed research area in 500 to 1,000 words in the space below. You should include the following:

- Reasons for choosing the research area you have mentioned in section D, and why it is important to you
- Reasons for choosing the university or universities you have ticked in section D
- If you are proposing a specific research project, how this would contribute to the general area of study
- Any previous experience you have in your proposed research area
- Anything else that would make you a suitable doctoral degree candidate

**J FUNDING**

Proposed means of financial support during your Pre-Doctorate at KIC London: Self / family Employer Government scholarship (please specify below) Other charitable organisation (please specify below) Other (please specify below)	Proposed means of financial support during your doctoral degree: Self / family Employer Government scholarship (please specify below) Other charitable organisation (please specify below) Other (please specify below)
Is your Pre-Doctorate funding provisional or confirmed?    Provisional    Confirmed	Is your doctoral degree funding provisional or confirmed?    Provisional    Confirmed
If your Pre-Doctorate funding is confirmed, please give the name and contact address of the person or organisation who is responsible for funding your tuition fees.	If your doctoral degree funding is confirmed, please give the name and contact address of the person or organisation who is responsible for funding your tuition fees.

### K DECLARATION OF CRIMINAL RECORD

Do you have any criminal convictions in any country? Yes No  
If yes, please provide details here, continuing on a separate sheet if necessary.

### L INSURANCE

Do you have comprehensive travel and health insurance for your Pre-Doctorate course?  
Yes No

If no, please note the insurance policy we offer will automatically be added to your study package. We will contact you with full details about the policy once your application has been accepted. Comprehensive insurance for the duration of your studies is compulsory. Failure to disclose relevant medical information might affect the validity of your insurance policy.

If yes, please attach a copy of your insurance policy document.

### M REPRESENTATIVE INFORMATION

Do you have an education representative? Yes (please provide details below) No

Kaplan representative name:

City in which representative is based:

### N MEDICAL INFORMATION

KIC London is committed to equal opportunities and aims to provide an inclusive learning environment for students with disabilities or additional requirements. To help us best support you, please provide as much information as you can on your particular needs.

Do you have any medical conditions? Yes No  
If yes, please give details of any medical conditions or allergies that require attention or notification and any prescribed medication taken regularly (this will not normally affect your application to KIC London and its Pre-Doctorate partner universities).

Completion and signing of this form gives permission to trained staff first aiders or any licensed hospital or physician to administer first aid if required for you.

Do you consider yourself to have a disability? Please tick all that apply.  
No disability  
Physical impairment or mobility issues such as difficulty using your arms or using a wheelchair or crutches  
Blindness or serious visual impairment uncorrected by glasses  
Deafness or serious hearing impairment  
Long-standing illness/health condition such as cancer, HIV, diabetes, chronic heart disease, epilepsy, asthma or sickle-cell anaemia  
Specific learning disability such as dyslexia, dyspraxia or ADHD  
Mental health condition such as depression, schizophrenia or anxiety disorder  
Social / communication impairment such as Asperger's syndrome or other autistic spectrum disorder  
Disability, impairment or medical condition that is not listed above

On a separate sheet, please provide further details of the nature of your disability and the support you would require. Please note that some support mechanisms might take considerable time to organise, such as books in braille format or modifications to buildings. We ask therefore that you include as much information as possible. Failure to disclose relevant medical information might affect the validity of your insurance policy.

Kaplan International College London will ensure all personal data enclosed will be used only to plan appropriate support, and might need to disclose appropriate and relevant details to partner universities to facilitate this process.

I agree to appropriate, relevant details being used in this way.

### O DECLARATION

I declare that the information I have supplied on and with this application form is complete and correct.

I understand that Kaplan International College London may need to process and store my information in countries outside the UK (and not subject to UK Data Protection laws), such as the United States or other countries where we have offices or service providers. I consent to the transfer of my information to these other countries.

I understand that the giving of false or incomplete information may lead to the refusal of my application or cancellation of my enrolment.

I have read, understood and agreed to the terms and conditions and fees of Kaplan International College London as outlined at: [kaplanpathways.com/uk-terms](http://kaplanpathways.com/uk-terms)

I hereby consent to Kaplan International College London contacting any school or institution at which I have previously studied in order to verify the information I have provided in the application, and hereby authorise such school or institution to disclose such information.

I undertake to pay the fees incurred as they are due and understand that Kaplan International College London fees may increase.

I authorise Kaplan International College London to supply any relevant data to partner universities, and to supply official records of my progress at Kaplan International College London to my parents, guardian, sponsor or their nominee.

I can confirm that I have read, understood and agree to the declaration above:

Name:

Date:

### P CHECKLIST

Please check you have supplied all the required information in this checklist:

1. Complete all sections of the application form: Yes
2. Confirm you agree to the declaration above: Yes
3. Attach certified copies of academic transcripts (with certified translations if transcripts are not in English) and Secure English Language Test results, as well as research proposals for any previous doctoral degree applications: Yes
4. Send your application and supporting documents to your Kaplan representative, the Application and Admissions Centre or your nearest Kaplan International Pathways country office. See [kaplanpathways.com/offices](http://kaplanpathways.com/offices) for details.