

Fashion Retail Academy

APPLICATION FORM 2012/2013

OFFICE USE:

PROPOSED COURSE APPLICATION

(Please only select one option)

Level 2 Diploma in Fashion Retail	<input type="checkbox"/>
National Diploma in Art & Design (Fashion & Clothing)	<input type="checkbox"/>
Extended National Diploma Art & Design (Graphic Design)	<input type="checkbox"/>
Extended National Diploma Business (Retail)	<input type="checkbox"/>

Level 3 Diploma in Fashion Retail	<input type="checkbox"/>
Level 4 Diploma in Buying and Merchandising	<input type="checkbox"/>
Level 4 Diploma in Visual Merchandising	<input type="checkbox"/>

PERSONAL DETAILS

SURNAME or FAMILY NAME	
FORENAME(S)	
TITLE (MISS, MRS, MR, MS)	
DATE OF BIRTH (DD/MM/YYYY)	
AGE ON AUG 31ST 2012	
HOME ADDRESS	
POSTCODE	
CURRENT EMAIL ADDRESS	
TELEPHONE	Home: _____ Mobile: _____
NATIONALITY:	COUNTRY OF PERMANENT RESIDENCE:
DO YOU NEED A VISA TO REMAIN IN THE UK?	YES / NO

SCHOOL / COLLEGE EDUCATION (Please specify your last institution)

INSTITUTION NAME:			
INSTITUTION ADDRESS:			
DATES OF ATTENDANCE	TO:		FROM:

WORK EXPERIENCE

Please give details of ANY employment or work experience (paid or unpaid) that you have undertaken:

NAME OF EMPLOYER	JOB TITLE / JOB ROLE	Dates of Employment

DATA PROTECTION

The information that you provide on this form will be retained by The Fashion Retail Academy in accordance with the data protection act 1988 and other applicable legislation. The academy will use the information to process your application and to provide relevant further information by post, email, or text message. It will also be used by the academy's marketing department. The academy will not share your details with any third party.

DECLARATION

I CONFIRM THAT, TO THE BEST OF MY KNOWLEDGE, THE INFORMATION GIVEN IN THIS FORM IS TRUE, COMPLETE AND ACCURATE. I GIVE MY CONSENT TO THE PROCESSING OF MY DATA BY THE FASHION RETAIL ACADEMY. I UNDERSTAND THAT ANY OFFER OF A PLACE ON THE ABOVE COURSE IS SUBJECT TO MY ACCEPTANCE OF THE ACADEMY'S TERMS AND CONDITIONS AND I AGREE TO ABIDE BY THEM.

APPLICANT'S SIGNATURE:

PRINT NAME:

DATE

MARKETING INFORMATION

WHERE DID YOU HEAR ABOUT THE FASHION RETAIL ACADEMY?

Word of Mouth

Direct contact with the Fashion Retail Academy

Fashion Retail Academy Website

Hotcourses/Floodlight

Link from sponsor website

Notgoingtouni

Search Engine

Open Doors Media

Fashion Retail Academy Open Day

Smaart Publications

Prospectus

Other article/advertisement in newspaper or magazine

Careers Fair

Facebook

OTHER (please specify):

Once completed please send to: **The Fashion Retail Academy, 15 GRESSE STREET, LONDON, W1T 1QL**

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Fashion Retail Academy

APPLICANT REFERENCES - TO BE COMPLETED BY THE REFEREE

Once completed please send to: **The Fashion Retail Academy, 15 GRESSE STREET, LONDON, W1T 1QL**

Please also indicate:

- The level of attendance and punctuality
- For applicants whose first language is not English, their standard of proficiency in written and oral English
- Any out of school activities this person is involved in

APPLICANTS FULL NAME:	
DIPLOMA APPLIED FOR:	

THIS SECTION SHOULD BE COMPLETED BY THE REFEREE:

FULL NAME:	
POSITION:	
IN WHAT CAPACITY DO YOU KNOW THE APPLICANT?	
CONTACT ADDRESS (Inc postcode)	
EMAIL ADDRESS	
TELEPHONE NUMBER:	

Please explain why you think that the candidate would be suitable for the Fashion Retail Academy. Please comment on punctuality, attendance and work ethic:

I CONFIRM THAT, TO THE BEST OF MY KNOWLEDGE, THE INFORMATION PROVIDED IN THIS FORM IS CORRECT AND COMPLETE:

REFEREE'S SIGNATURE:

DATE:

STAMP OF INSTITUTION: