



Please attach a passport size photograph here

Application Form for Auditors 2010-11

1. Personal Information

Name	
What do you prefer to be called?	
Address	
Telephone	Daytime Evening Mobile
Email	
Date of birth	
Occupation	

2. SEITE Modules

Which modules would you like to study as an auditor? Term 1 Term 2 Term 3	(Names of modules e.g. Biblical Studies 1)
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3. Place of study

Where would you like to be auditor? (Please delete as appropriate)	Southwark on Tuesday evenings Chatham on Wednesday evenings
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4. Academic qualifications

(Please give the overall number of CSEs, GCSEs, or O levels and grades, plus full details of other qualifications):

Subject studied (or number of CSEs, 'O' levels or GCSEs)	Level at which studied (A level, certificate, diploma, degree etc)	Name of school, college or university	Grade	Date of qualification

5. Work History

(Please give details of your occupation, and if relevant your employer and dates of employment):

Dates of work	Nature of work	Employer

6. Reason for study

Please explain below in approximately 150-200 words why you would like to study Applied Christian Theology at SEITE:

7. Church Affiliation

Please give the name, address and denomination of your church, if any:

8. Disability

We welcome applications from people with disabilities. Please tell us of any impairment or disability you have, and of any reasonable adjustments that are needed as a result:

9. Open Evening

Which Open Evening would you like to attend? (Please delete as appropriate)	Tuesday 25 th May 2010 Southwark Tuesday 8 th June 2010 Southwark Wednesday 9 th June 2010 Medway
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10. Referees

Please give the names and addresses of two people whom know you well (one of whom ought to be able to comment on your academic ability) and who would be willing to give a reference. (Please check with them in advance.)		
Name		
Occupation		
Relationship to you		
Address		
Telephone		
Mobile		
Email		

13. Data Protection

SEITE takes great care to ensure that personal details of students are circulated only to tutors and those within the Institute who need to know. Please tick this box if you do not want SEITE to circulate your name, address or telephone number to other students if requested to do so.

Please note that it is SEITE's policy to circulate student emails within the staff and student body.

I wish to apply for a place to study with SEITE and I enclose a deposit of £60 with this application form. (Cheques should be made payable to SEITE.)

Signed:

Date:

Please return the completed form to: The Administrator, SEITE, Ground Floor, Sun Pier House, Medway Street, Chatham, Kent, ME4 4HF.