Student Centre | Chichester College | Westgate Fields Chichester | West Sussex | PO19 1SB | ENGLAND

1 +44 (0)1243 536294

studyabroad@chichester.ac.uk



Please complete all sections of this form in BLOCK CAPITAL LETTERS.

ACCOMMODATION APPLICATION FORM

COURSE DETAILS COURSE REQUIRED:					
SUBJECT(S):					
COURSE DATES:		EXPECTED ARRIVAL & DEPARTUR	RE DATES: (IF KNOWN))	
FROM:	T0:	FROM:		T0:	
PERSONAL DETAILS FAMILY NAME: FIRST NAME(S):					
GENDER: (PLEASE TICK APPROPRIATE BOX) FEMALE UNSPECIFIED UNSPECIFIED	TITLE: DATE OF BIRTH:	NATIONALITY: COUNTRY OF BIRTH:			
CONTACT DETAILS					
YOUR CONTACT DETAILS ADDRESS:		PARENTS'S COI	NTACT DETA	AILS	
COUNTRY: TELEPHONE: (PLEASE INCLUDE AREA CODE NUMBER)		COUNTRY: TELEPHONE: (PLEASE INCLUDE	ARFA CODF NUMBER)		
MOBILE: (PLEASE INCLUDE AREA CODE NUMBER)		MOBILE: (PLEASE INCLUDE AREA			
EMAIL:		EMAIL:			

ACCOMMODATION (IMPORTANT: PLEASE INDICATE YOUR FIRST AND SECOND CHOICE OF ACCOMMODATION EG 1 - FIRST CHOICE / 2 - SECOND CHOICE)

FOR CTURFUTO AGEN 10 17 VEARC OLD		FOR CTURENTS AGED 10 VEADS AND	ADOVE	
FOR STUDENTS AGED 16-17 YEARS OLD		FOR STUDENTS AGED 18 YEARS AND ABOVE		
WOODLANDS HALLS OF RESIDENCE - (FULL BOARD ONLY)	Chichester campus	WESTGATE HALLS OF RESIDENCE - Chichester Campus		
HOMESTAY (HALF BOARD) **Please specify how ma	ny nights required per week	HOMESTAY (HALF BOARD)* Please specify how to	many nights required per week	
* IF YOU WOULD LIKE TO MOVE TO WESTGATE W THIS NEEDS TO BE REQUESTED ON APPLICATION **UP TO FOUR STUDENTS MAY BE ACCOMMODA"		*UP TO FOUR STUDENTS MAY BE ACCOMMOI	DATED IN HOMESTAY	
ACCOMMODATION REQUIREMENTS				
ARE YOU WILLING TO SHARE A ROOM?	YES NO	DO YOU HAVE ANY MEDICAL PROBLEMS?	YES NO	
ARE YOU WILLING TO SHARE WITH STUDENTS WHO SPEAK THE SAME FIRST LANGUAGE AS YOU?	YES NO	IF YES, PLEASE GIVE DETAILS:		
DO YOU HAVE ANY SPECIAL DIETARY REQUIREMENTS?	YES NO			
IF YES, PLEASE GIVE DETAILS INCLUDING ANY FOODS YOU CANNOT E (EG CELIAC, VEGETARIAN, ETC):	AT			
		DO YOU SMOKE? ARE YOU WILLING TO LIVE IN A HOUSEHOLD WITH SMOKERS?	YES NO YES NO	
		MANY BRITISH FAMILIES HAVE PETS. IF YOU HAVE AN ALLERG (EG DOG, CAT, RABBIT, ETC), PLEASE GIVE DETAILS BELOW:		
IF UNDER 18, ARE YOU WILLING TO SHARE WITH STUDENTS WHO ARE 18+?	YES NO			
DO YOU HAVE ANY SPECIAL REQUESTS REGARDING ACCOMMODATION	N?			
HOBBIES & INTERESTS (PLEASE LET US KN	OW AS THIS WILL HELP U	S WHEN PLACING YOU IN YOUR HOMESTAY ACCO	MMODATION)	

MEDICAL DETAILS (ALL QUESTIONS MUST B	E ANSWERED AND PLEASE	ATTACH ANY RELEVANT MEDICAL REPORTS TO	THIS FORM)
DO YOU HAVE A DISABILITY THAT MAY AFFECT YOUR ACCOMMODATION REQUIREMENTS?	YES NO	DO YOU HAVE A LEARNING DISABILITY/DIFFICULTY EG AUTISM OR ADHD?	YES NO
DO YOU TAKE ANY MEDICATION OF ANY KIND, WHETHER PRESCRIBED OR NOT?	YES NO	OTHER ILLNESS OR DISABILITY?	YES NO
HAVE YOU RECEIVED ANY MEDICAL, SURGICAL OR PSYCHIATRIC TREATMENT OF ANY KIND FROM A DOCTOR OR IN HOSPITAL IN THE LAST 3 YEARS?	YES NO	EHCP	YES NO
DO YOU HAVE ANY UNSPENT CRIMINAL CONVICTIONS, ANY OUTSTANDING COURT PROCEEDINGS, OR ARE YOU RELEASED UNDER POLICE INVESTIGATION?	YES NO		
IF YOU ANSWERED YES TO ANY OF THE QUESTIONS IN THIS SECTION	I, PLEASE GIVE DETAILS?		
HAVE YOU BEEN VACCINATED AGAINST TETANUS IN THE LAST 5 YE	ARS AND HEPATITIS A OR B, DIPTHER	RIA, MMR (MEASLES, MUMPS & RUBELLA) AND MENINGOCOCCA	L? YES NO
IF NO, WHICH ONES HAVE YOU NOT BEEN VACCINATED AGAINST?:			
MEDICAL INFORMATION			
IT MAY BE IMPORTANT TO YOUR WELFARE THAT THIS MEDICAL INFO	NAMATIAN IS SHARFA WITH RFI FVAN	IT PARTIES WHILST LIVING IN COLLEGE ACCOMMODATION	
I GIVE PERMISSION FOR MY INFORMATION TO BE SHARED IN APPRO			YES NO
PAYMENT OF FEES OR DEPOSIT			
WHO IS PAYING FOR YOUR TUITION FEES?	THEN / DI FACE CDECIEV\		
	HER (PLEASE SPECIFY)		
WHO IS PAYING FOR YOUR ACCOMMODATION FEES?			
YOURSELF, PARENTS OR FAMILY AGENT OT	HER (PLEASE SPECIFY)		
ARE YOU SPONSORED BY THE HONG KONG GOVERNMENT?	YES NO		
VISA INFORMATION			
HAVE YOU PREVIOUSLY STUDIED IN THE UK?	YES NO		
		IE VALUE AND THE PROPERTY OF THE PARTY OF TH	IO DI ELOE DROUGE ACCUE
HAVE YOU PREVIOUSLY HAD A TIER 4 VISA?	YES NO	IF YOU HAVE ANSWERED YES TO EITHER OF THESE QUESTION OF ALL OF THE OLD UK VISAS.	IS, PLEASE PROVIDE COPIES

AIRPORT TRANSFERS							
NOT REQUIRED YES, HEATHROW (ONE WAY) YES, SOUTHAMPTON (ONE WAY)	ALL HAVE REQUESTED A TRANSPER						
YES, GATWICK (ONE WAY) YES, HEATHROW (RETURN) YES, SOUTHAMPTON (RETURN) SERVI	OU HAVE REQUESTED A TRANSFER ICE, Please send US Your Flight ILS once you have booked Your Flight.						
YES, GATWICK (RETURN) YES, STANSTED (ONE WAY)	ILS ONGE TOO HAVE DOONED TOOK TEIGHT.						
SIGNATURE (STUDENT OR PARENT/GUARDIAN IF STUDENT IS UNDER 18 YEARS OF AGE) IMPORTANT: BY ENROLLING THE STUDENT ONTO THE COURSE THE PARENT/GUARDIAN IS GRANTING PERMISSION FOR THE STUDENT TO ATTEND ALL ACTIVITIES ORGANISED BY THE COLLEGE. I AGREE THAT THE INFORMATION CONTAINED ON THIS FORM CAN BE GIVEN TO MY ACCOMMODATION PROVIDER. SIGNED: DATE: I CAN CONFIRM THAT I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS, WHICH CAN BE FOUND ON THE COLLEGE WEBSITE (HTTPS://CHICHESTER.AC.UK/SITES/DEFAULT/FILES/TANDCS.PDF), PLEASE TICK THE BOX							
General Data Protection Regulation (GDPR) Your data is being held securely and in compliance with GDPR. You have the right to access, review, and update this data for completeness and accuracy at any time. The information is held as hard copy. The information is used for your stay at the college including your host provider if applicable. The data is held for 7 years as part of your student file. After this time the data	TICK THIS BOX IF YOU WISH TO BE CONTACTED VIA PHONE OR EMAIL WITH FURTHER INFORMATION FROM THE COLLEGE ABOUT COURSES, LEARNING OPPORTUNITIES, SURVEYS AND RESEARCH WE WILL NOT PASS YOUR DETAILS						

RETURNING THE COMPLETED FORM

Whilst every effort will be made to meet your specific request, accommodation is limited. The sooner you submit this form the more likely that your needs will be met. Please email to **studyabroad@chichester.ac.uk** or post with required deposit to **Student Centre, Chichester College, Westgate fields, Chichester, West Sussex, PO19 1SB, ENGLAND**