

# REFERENCE FORM

## **Undergraduate Diploma in Archaeology Module 2: Later Prehistoric and Roman Britain 2011-2012**

### Notes to the applicant

Enter your full name and address below and on a plain envelope. Carefully detach this form and send to your referee, asking him/her to provide a reference and return it to you in a sealed envelope. Send the unopened envelope containing your reference with your application form to the Award Programme Administrator, OUDCE, Rewley House, 1 Wellington Square, Oxford OX1 2JA. Please note that the reference is compulsory and we cannot consider your application without it.

### Notes to the referee

We would be most grateful if you could let us have a reference for the applicant named below, who is applying for a place on a part-time course at the University of Oxford Department for Continuing Education. It would be helpful if your reference could cover the points below and, if you have knowledge of the applicant's recent study, please indicate the standard attained. References marked 'Strictly Confidential' will be treated as such, subject to the provisions for the Data Protection Act 1998.

- How long have you known the applicant and in what capacity?
- Please comment upon any aspect of the applicant's education, career or interests that will support their application.
- Do you consider that the applicant has the necessary commitment and interest to pursue an intensive part-time course?
- Are you able to support their application without reservation?
- Is there any other information you consider relevant to this application?

Please complete the 'Contact Details' section, and use the reverse of this form for your comments or, if you prefer to use your own notepaper, please attach this form to the front of your reference as an identifying header sheet.

Please send this reference direct to the applicant, taking care to seal the back of your envelope and sign across the seal.

Name of applicant: .....

Address: .....

.....

.....Postcode: .....

continued overleaf



# APPLICATION FORM

## Undergraduate Diploma in Archaeology Module 2: Later Prehistoric and Roman Britain 2011-2012

Title  First name/s

Last Name

Address

Postcode

Telephone

Email

Male  Female  Date of Birth

Nationality

Occupation

Please indicate how you first heard about this course:

|                                       |                          |                                 |                          |
|---------------------------------------|--------------------------|---------------------------------|--------------------------|
| Friend / recommendation / referral    | <input type="checkbox"/> | Continuing Education Prospectus | <input type="checkbox"/> |
| Leaflet at Rewley House / Ewert House | <input type="checkbox"/> | Continuing Education Newspaper  | <input type="checkbox"/> |
| Leaflet in library / museum           | <input type="checkbox"/> | Email from Continuing Education | <input type="checkbox"/> |
| Leaflet in magazine                   | <input type="checkbox"/> | Oxford University website       | <input type="checkbox"/> |
| Leaflet elsewhere                     | <input type="checkbox"/> | Continuing Education website    | <input type="checkbox"/> |

Newspaper / magazine advertisement/ Other - please specify

Periodically, the Department may send you information about its future programmes, about other activities related to its programmes and about the benefits and services which are available to students of the Department. If you do not wish to receive such information, please tick the following boxes:

I do not wish to receive information by post.

I do not wish to receive information by email.

## PREVIOUS EDUCATIONAL QUALIFICATIONS

If you have any educational qualifications, please tick ALL boxes that apply:

GCSE/O Level       Highers/ A Level       HNC/HND

Baccalaureate       Access-Level course

GNVQ/GSVQ (Specify level)       NVQ/SVQ (Specify level)

Foundation course at FE-level       Foundation course at HE-level

Undergraduate Qualification at HE-level (eg Certificate / Diploma) Please specify

First degree  UK  EU  Other

Postgraduate Degree (Masters or Doctorate)  UK  EU  Other

Postgraduate Qualification (eg Certificate/Diploma) Please specify

Teaching Qualifications (Please specify)

Other (Please specify)

Previous registration at Oxford University

Have you ever applied to or enrolled in any other courses at Oxford University, including any at this Department? Yes  No

If yes, please give details below or use a separate sheet.

Name of course

Year

Are you studying for an Open University Degree?      Yes  No

If yes, please state OU Personal Identifier:

By giving us your Personal Identifier, you consent to us sharing your information/results with the Open University.

## RESIDENCY

Permanent or home address, if different from page 1

Please complete section 1, 2 or 3. Details about the residency classification for Home/EU and Non-EU students may be found on <http://www.admin.ox.ac.uk/studentfunding/fees/feerates/feestatus.shtml> or telephone the Student Adviser on 01865 280355 if you have any queries.

1. If you are a BRITISH CITIZEN (or are the spouse or child of same) have you been resident in the UK for the last three years, other than for the purposes of full-time education? Yes  No
2. If you are an EU/EEA CITIZEN (or are the spouse or child of same) have you been resident in the EU for the last three years, other than for the purposes of full-time education? Yes  No
3. If you are a NON-EU CITIZEN (or are the spouse or child of same) have you been resident in the UK for the last three years, other than for the purposes of full-time education? Yes  No

NOTE The European Union includes the following countries:

|  |   |
|--|---|
| Austria  | Republic of Ireland   |
| Belgium  | Italy   |
| Bulgaria   | Latvia  |
| Cyprus   | Lithuania   |
| Czech Republic   | Luxembourg  |
| Denmark (not including the Faroe Islands and Greenland)  | Malta   |
| Estonia  | Netherlands   |
| Finland  | Poland  |
| France (including the French overseas departments of Guadeloupe, Martinique, French Guyana, Reunion, Saint-Pierre et Miquelon) | Portugal (including the Azores and Madeira)                             |
| Germany (including Heligoland)   | Rumania   |
| Greece   | Slovakia  |
| Hungary  | Slovenia  |
|  | Spain (including Ceuta, Melilla, the Balearic Islands and the Canaries) |
|  | Sweden  |
|  | United Kingdom (with Gibraltar)   |

The European Economic Area comprises Iceland, Norway and Liechtenstein in addition to the 27 member states of the EU.

## ETHNICITY

|                                    |                          |                               |                          |
|------------------------------------|--------------------------|-------------------------------|--------------------------|
| White                              | <input type="checkbox"/> | Chinese                       | <input type="checkbox"/> |
| Irish Traveller                    | <input type="checkbox"/> | Other Asian Background        | <input type="checkbox"/> |
| Black or Black British Caribbean   | <input type="checkbox"/> | Mixed White & Black Caribbean | <input type="checkbox"/> |
| Black or Black British African     | <input type="checkbox"/> | Mixed White & Black African   | <input type="checkbox"/> |
| Other Black Background             | <input type="checkbox"/> | Mixed White & Asian           | <input type="checkbox"/> |
| Asian or Asian British Indian      | <input type="checkbox"/> | Other Mixed Background        | <input type="checkbox"/> |
| Asian or Asian British Pakistani   | <input type="checkbox"/> | Other Ethnic Background       | <input type="checkbox"/> |
| Asian or Asian British Bangladeshi | <input type="checkbox"/> | Not known                     | <input type="checkbox"/> |
|                                    |                          | I do not wish to answer       | <input type="checkbox"/> |

## SPECIAL NEED OR DISABILITY

Do you have a disability / special need / learning difficulty? Yes  No

If so, please state your disability / special need / learning difficulty:

Please complete and return this form to:

Award Programme Administrator, OUDCE, 1 Wellington Square, Oxford, OX1 2JA

I enclose with this application form (do not enclose any money at this stage):

- i) the envelope containing my letter of reference from my referee
- ii) additional materials referred to in the How to Apply section of the course booklet.

I understand that, if I am accepted for this course, I will be required to pay a non-refundable deposit of £200 (Home/EU students) or £350 (Non-EU students) at the time of acceptance which is applied towards the overall course fee.

Signed:  Date:

The Department for Continuing Education may occasionally wish to collect images (both photographs and video recordings) of its activities, including lectures, tutorials, seminars and social events. These photographs and video recordings may be used by the Department for Continuing Education and the University for promotion of their educational activities.

I hereby grant to the Department for Continuing Education and Oxford University the right and permission to take, hold, use, and publish photographs and video recordings in which I appear in printed or electronic media, including the internet, for advertising and promoting educational activities. I understand that if I no longer want a photograph in which I appear to be used, I can contact [ppaward@conted.ox.ac.uk](mailto:ppaward@conted.ox.ac.uk) to request that it be removed. However, I accept that it might not always be possible to remove all existing copies from circulation.

Please tick this box if you do not wish photographs and video recordings of you to be used as described above:

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Information collected on this form will be held in accordance with the provisions of the Data Protection Act 1998 for the purposes of processing your application and for student administration. It will be held securely and not passed on to third parties (please see our privacy policy at <http://www.admin.ox.ac.uk/councilsec/privacy.shtml> for further information).



CONTACT DETAILS

Signature of referee:.....Date:.....

Name:.....

Address:.....

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.....Postcode:.....

Tel:.....

E-Mail: .....