



## UWC SHORT-COURSE APPLICATION FORM 2018

Applications are invited for a UWC short course.

In order to be able to compete for the placements, students must fulfill all of the following criteria:

- Motivation to learn, explore new ideas in a multi-cultural environment
- 15 – 18 years of age
- Good academic ability

In addition, students should demonstrate:

- An understanding of UWC ideals and its Mission, particularly the focus on international peace and cross-cultural understanding;
- A commitment to providing service to others;
- Tolerance, adaptability and signs of integrity and strength of character

**PART I: APPLICATION COVER SHEET**  
(to be completed by the Applicant)

**A. PERSONAL & CONTACT INFORMATION**

Family Name:		
First Names:		
Gender:		
Date of Birth: (dd/mm/yyyy)		
Country and City of Birth:		
Nationality:		
Please list any additional nationalities/passports you hold:		
Residential Address:		
City:		Country:
Tel. home:		Tel. mobile:
Email:		

**B. LANGUAGE ABILITY**

1. What is your home language or mother-tongue:			
2. Name any other languages you speak:			
<b>3. WHAT IS YOUR LEVEL OF ENGLISH?</b>			
<i>(please tick)</i>			
Speaking:	<input type="checkbox"/> FLUENT	<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> BEGINNER
Reading:	<input type="checkbox"/> FLUENT	<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> BEGINNER
Writing:	<input type="checkbox"/> FLUENT	<input type="checkbox"/> INTERMEDIATE	<input type="checkbox"/> BEGINNER

**C. SCHOOL INFORMATION**

2. Current School Name and Address:

School Telephone:

School website:

**D. WHICH UWC SHORT COURSE WOULD YOU LIKE TO ATTEND? WHY?**

1st choice:

2<sup>nd</sup> choice:

**E. HOW DID YOU LEARN ABOUT UWC SHORT COURSES?**

**F. HEALTH INFORMATION**

1. Do you have any medical conditions, allergies, and/or special needs? Please give details. If you need more space, a separate letter may be enclosed.

2. Do you have any special dietary needs?

## **G. QUESTIONS**

*The selection committee will use your answers in the following section to learn more about you, and what motivates you.*

*Please note there is a limit of 1000 characters for each question.*

1. Why would you like to attend a UWC short course?

2. What do you feel you could contribute to the programme?

3. What do you hope to attain from this programme?

4. What problem or problems in your immediate surroundings have you observed and would like to find a solution to?

## APPLICANT DECLARATION AND SIGNATURE

I hereby declare:

- That I have filled out this application by myself.
- That I have discussed my application for a UWC short course with my parent(s)/guardian(s) and have their full approval.
- That, should the application be successful, I undertake for myself to observe the rules and regulations of the UWC short course as set by the UWC Short Course Organisers.

\_\_\_\_\_  
Applicant's Signature

Date:

## Part II: Parent or Guardian Information (to be completed by the Applicant's Parents or a Guardian)

Father/ Guardian Name:

Nationality:

Occupation and Place of Work:

Residential Address:  
(leave blank if same as the applicant)

Tel. mobile:

Email:

Mother/ Guardian Name:

Nationality:

Occupation and Place of Work:

Residential  
Address:  
(leave blank if same  
as the applic

Tel Mobile:

Email:

## PARENT/GUARDIAN SIGNATURE

I have read the application for application to a UWC short course made by my son/daughter/ward, and approve. Should the application be successful, I give my approval for the UWC short course organisers to take full responsibility for the personal care and welfare of my child for the duration of the course.

Signature and name of Father/Guardian:

Signature and name of Mother/Guardian

Date:

Date: