



PRIVATE & CONFIDENTIAL

APPLICATION and CHEVENING SCHOLARSHIP FORM

Full time MA INTERNATIONAL LABOUR & TRADE UNION STUDIES

1. PERSONAL DETAILS

Name:

First names:

Family name:

Name you wish to be known by:

Address:

_____ email: _____

Fax: _____ Tel: _____

[include country code]

Date of Birth: __/__/__ Age: _____

Country and Place of birth: _____

Nationality: _____

Male/Female _____

SIGNATURE: _____

DATE: _____

2. EDUCATION and QUALIFICATIONS

UNIVERSITY / COLLEGES since leaving school:

Name/s and Address/s

Course/s taken.

<i>Title of course</i>	<i>Dates of course</i>	<i>Part time</i>	<i>Full time</i>	<i>Main subjects studied</i>	<i>Qualification gained</i>	<i>Level of qualification</i>

Any other information you wish to give on your education:

NB Please enclose copies of your qualification certificates

3. EMPLOYMENT

Current occupation/job title

Employer name and address

Date when you started _____

State present salary _____

Previous Occupations (stating dates and reasons for leaving)

4. ACTIVISM

Do you belong to/are employed by any of the following organisations?

- Trade Union
- Co-operative Society
- Political Organisation
- Community, pressure or campaigning group
- Church or other similar group
- Other [please specify]

State in each case (use separate sheet if necessary)

a) Name and address of any organisation ticked above

b)

Name and address of current Secretary, Chairman or President

c)

What active part you play/ed

d)

If a Member, elected official or paid official give details

e)

How long have you served the Association or been a member?

e)

State briefly the purpose and work of the Organisation

5. REFERENCES AND TESTIMONIALS

Please ask **three** people (using Form B enclosed) to write confidentially to Ruskin College on your behalf, regarding

1. Your education, ESPECIALLY your capacity for post-graduate level study.
2. Your work/activism & contribution to the labour movement,
3. Your character.

These should be:

1. Those who taught you
2. An official of any organisation/trade union to which you belong and are active
3. A present or past employer or other responsible person who knows you well

Please give contact details of each below:

Name	Address, tel, fax, email	Official Position
1 _____	_____	_____
_____	_____	_____
_____	_____	_____
2 _____	_____	_____
_____	_____	_____
_____	_____	_____
3 _____	_____	_____
_____	_____	_____
_____	_____	_____

SCHOLARSHIP INFORMATION

1. HEALTH

Have you ever been seriously ill? If Yes, state Illness, duration and dates

- Yes
- No

Please ask your Doctor to complete **Form A** and return it to Ruskin direct.

2. DOCUMENTATION - passport and visas

Passport.

NB Your passport must be valid for at least 6 months after the end of the course you are applying for

Do you hold a valid current passport? Yes/No

Are there any restrictions on your passport? Yes/No

If YES please specify:

What is the date when your current passport expires/finishes?

Your passport number and your name exactly as on your passport & send a photocopy

Visas

Have you ever been refused a visa for another country? Yes/No

If YES, please give details:

Do you currently hold any valid visas? Yes/No

If YES please give details:

Have you applied to Ruskin before? Yes/No

if YES please give date

Have you attended any Ruskin courses previously? Yes/No

if YES please give dates and course title.

3. FOREIGN TRAVEL

Have you ever visited, lived, worked or studied in a foreign country before?

- Yes
- No

State country/countries, places visited, giving dates and duration of stay

4. LANGUAGES

What language is your Mother Tongue?

What other languages do you speak and write ?

Did you learn English at school? _____
If so, at what age did you begin? _____

For how many years altogether have you studied or been studying English?

Do you have an English language qualification? **The requirement for the Scholarship is IELTS level 6 or equivalent.**

If so, please specify

- the accreditation body: _____
- level/grade: _____
- date awarded: _____

Please enclose a copy of your evidence/certificate.

5. INFORMATION TECHNOLOGY/COMPUTING (IT)

Please describe your level of IT skills by ticking the boxes below:

<i>IT applications; please specify programs used</i>	<i>Advanced level</i>	<i>Intermediate /middling</i>	<i>basic</i>	<i>none</i>
Word processing				
Spread sheets				
Data bases				
Other (please specify)				

6. WRITTEN STATEMENT – 2000 words**[NB please write this separately]:**
on

“Why I want to study International Labour and Trade Union Studies at Ruskin College”.

NB If you are also applying for a scholarship, please note that a condition of the Chevening scholarship is that scholars return to 'put something back' into their labour movement in their home country. Your 2000 words should include a discussion of what would you aim to achieve and how would you hope to do so?

7. DECLARATION BY APPLICANT

I declare the information given here is correct and to the best of my knowledge includes no false statement.

Date __/__/__

Signed _____

Thank you.

Now please return to:

Liz Mathews, Administrator,
International Labour & Trade Union Studies and Scholarships
Ruskin College,
Stoke House,
7 Stoke Place
Old Headington
OXFORD OX3 9BX.
UK.

lmathews@ruskin.ac.uk

Tel: 00 44 1865 759600/759608. Fax: 0044 1865 741043. website: www.ruskin.ac.uk

Or Student Enquiries: 00 44 1865 554331

Please email to confirm date of posting: lmathews@ruskin.ac.uk

CONFIDENTIAL FORM A MEDICAL CERTIFICATE

MA ILTUS & CHEVENING SCHOLARSHIP PROGRAMME

Re: [name of applicant] _____

This is to certify that the above-named person is free from infections or contagious disease and in my opinion is fit to pursue a full time residential course at Ruskin College.

Signed: _____

Professional qualifications and stamp:

Date __/__/__

Address

EMAIL: _____

Telephone: _____

Fax: _____

Note the Doctor, by agreement with the prospective student, is invited to inform the College under confidential cover if there are any special circumstances which in the interests of the student or the College as a residential community, ought to be brought to notice.

Return to:

Liz Mathews, Administrator,

International Labour & Trade Union Studies and Scholarships

Ruskin College,

Stoke House,

7 Stoke Place

Old Headington

OXFORD OX3 9BX. UK.

lmathews@ruskin.ac.uk

Tel: 00 44 1865 759600/759608. Fax: 0044 1865 741043. website: www.ruskin.ac.uk

Please email to confirm date of posting: lmathews@ruskin.ac.uk

CONFIDENTIAL FORM B1.

EDUCATIONAL REFEREE

MA ILTUS & CHEVENING SCHOLARSHIP PROGRAMME

Candidate's Name: _____

Referee's Name and title: _____

Qualifications and institution/organisation stamp

Address:

Capacity in which the candidate is known to me: _____

The above named person has applied to the College for a Ruskin/Chevening Trade Union scholarship and given your name as an educational referee. Please write in confidence about her/him giving your opinion of:

Their educational achievements so far, and in particular, their capacity to study at post-graduate level in English.

We are grateful to you for undertaking this. Your comments will be treated in confidence. Please write on additional pages as necessary.

Please return to:

Liz Mathews, Administrator,
International Labour & Trade Union Studies and Scholarships

Ruskin College,
Stoke House, 7 Stoke Place

Old Headington
OXFORD OX3 9BX. UK.

lmathews@ruskin.ac.uk

Tel: 00 44 1865 759600/759608. Fax: 0044 1865 741043. website: www.ruskin.ac.uk

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**CONFIDENTIAL FORM B2.
TRADE UNION/LABOUR MOVEMENT/EMPLOYER REFEREE
MA ILTUS & CHEVENING SCHOLARSHIP PROGRAMME**

Candidate's Name: _____

Referee's Name and title: _____

Qualifications and institution/organisation stamp

Address:

Capacity in which the candidate is known to me: _____

The above named person has applied to the College for a Ruskin/Chevening Trade Union scholarship and given your name as their employer/trade union representative referee. Please write in confidence about her/him giving your opinion of:

- **Their role and capabilities as a trade union/labour movement/NGO etc activist, their commitment to the movement and how you see their proposed programme of study for the MA International Labour & Trade Union Studies enhancing and developing their capacity.**
- **The level of commitment and support your organisation is prepared to give to the applicant should they be successful.**

We are grateful to you for undertaking this. Your comments will be treated in confidence. Please write on additional pages if necessary.

Please return to:

Liz Mathews, Administrator,
International Labour & Trade Union Studies and Scholarships
Ruskin College,
Stoke House, 7 Stoke Place
Old Headington
OXFORD OX3 9BX. UK.

Tel: 00 44 1865 759600/759608. Fax: 0044 1865 741043. website: www.ruskin.ac.uk

Please email to confirm date of posting: lmathews@ruskin.ac.uk

CONFIDENTIAL FORM B3.

**TRADE UNION/LABOUR MOVEMENT PERSONAL REFEREE
CHEVENING SCHOLARSHIP PROGRAMME**

Candidate's Name: _____

Referee's Name and title: _____

Qualifications and institution/organisation stamp

Address:

Capacity in which the candidate is known to me: _____

The above named person has applied to the College for a Ruskin/Chevening Trade Union scholarship and given your name as their employer/trade union representative referee. Please write in confidence about her/him giving your opinion of:

- **Their role and capabilities as a trade union/labour movement/NGO etc activist, their commitment to the movement and how you see their proposed programme of study for the MA International Labour & Trade Union Studies enhancing and developing their capacity.**

We are grateful to you for undertaking this. Your comments will be treated in confidence. Please write on additional pages if necessary.

Please return to:

Liz Mathews, Administrator,

International Labour & Trade Union Studies and Scholarships

Ruskin College,

Stoke House, 7 Stoke Place

Old Headington

OXFORD OX3 9BX. UK.

Tel: 00 44 1865 759600/759608. Fax: 0044 1865 741043. website: www.ruskin.ac.uk

Please email to confirm date of posting: lmathews@ruskin.ac.uk

Data Protection

Ruskin College collects information about all our staff and students for various administrative, academic and health and safety reasons.

Because of the Data Protection Act 1998, we need your consent before we can do this. Since we cannot operate the College effectively without processing information about you, we need you to sign the following consent to process clause.

If you do not do so, we will be unable to offer you a course place and may withdraw any offer already made.

If you require any further information about this, please contact the Admissions Secretary.

I agree to Ruskin College processing personal data contained in this form, or other data which the College may obtain from me or other people, whilst I am a student. I agree to the processing of such data for any purposes connected with my studies or my health and safety whilst on the premises or for any other legitimate reason.

Sensitive Data

I (name) _____

give my consent to Ruskin College recording and processing information about me in the following categories (please tick each box or cross out any category for which you **do not** give permission);

- (1) Race and ethnic origin
- (2) Membership of trade union
- (3) Physical or mental health or medical condition
- (4) Criminal records
- (5) Country of Birth and Nationality

The information will be used for the following purposes:

Purpose Information Category

- Checking suitability and fitness for course places (3, 4)
- Managing and maintaining a safe college environment (3)
- Managing duties and obligations under the Disability Discrimination Act (3)
- **Administering scholarship arrangements (2)**
- Monitoring college performance against targets (1)
- Assessing student support needs (3)
- Assessing grant eligibility (5)

I understand that this information will be used only for the purposes set out in the statement above and my consent is conditional upon Ruskin College complying with their obligations and duties under the Data Protection Act 1998.

Signed

Dated _____

Monitoring Information

Ruskin College is working towards equal opportunities. To help us monitor our policy you are asked to provide the information requested below. This information is confidential and does not form part of your application. This slip will be detached from your application form when it is received and the information will not be taken into account when your application is considered.

Surname _____ Initials _____

Are you Male Female

Are you disabled? Yes No If yes, please specify _____

To which of these groups do you consider you belong? (tick one only)

Asian or Asian British - Bangladeshi

Asian or Asian British – Indian

Asian or Asian British – Pakistani

Asian or Asian British - Any other Asian Background

Black or Black British - African

Black or Black British - Caribbean

Black or Black British - Any other Black Background

Chinese

Mixed - White and Asian

Mixed - White and Black African

Mixed - White and Black Caribbean

Mixed - Any other Mixed Background

White - British

White - Irish

White - Any other White Background

Other (specify) _____