



Dear student:

The University of Stirling requires applicants to complete their forms in order to be considered for application. These forms are in addition to the ones required by IFSA-Butler. Due to different privacy laws in Scotland, the University of Stirling is permitted to ask applicants to disclose information that IFSA-Butler is not allowed to request. These questions have been marked out on the University of Stirling forms and have been included below.

Please answer these questions and put them in a sealed envelope. Return the envelope with your other forms. Your answers to these questions will be forwarded to the University of Stirling unopened. Your application will not be complete until we receive these answers. Thank you for your prompt attention to this matter. Please contact us if you have any questions.

Sincerely,

IFSA-Butler

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### UNIVERSITY OF STIRLING: APPLICATION INSTRUCTIONS

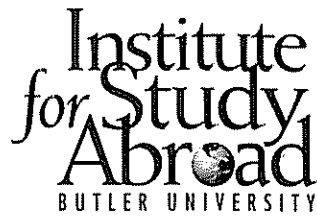
Read these instructions carefully before answering the questions on the attached sheet.

#### **Ethnicity**

We use this information to monitor application rates and equal opportunities only, not for admission purposes. It is confidential and protected from misuse.

Insert the applicable code on the application form

<i>White</i>		Other Asian	39
British	11	<i>Mixed</i>	
Irish	12	White & Black Caribbean	41
Other White	19	White & Black African	42
<i>Black or Black British</i>		White & Asian	43
Caribbean	21	Other Mixed Background	49
African	22	Other Ethnic	80
Other Black	29	Info. Refused	98
<i>Asian or Asian British</i>			
Indian	31		
Pakistani	32		
Bangladeshi	33		
Chinese	34		



### **Occupational Background**

If you are under 21, please give occupation of your parent, stepparent or guardian, spouse/partner who earns the most. If he or she is retired or unemployed, give their most recent occupation. If you are over 21, please give your own occupation.

Please note that we use this information to monitor application rates and equal opportunities only, not for admissions purposes. It is confidential and protected from misuse.

### **Disability**

Insert the applicable code on the application form and then expand upon any special arrangements or facilities you may require.

- 1 Dyslexia
- 2 Blind/partially sighted
- 3 Deaf/hearing impairment
- 4 Wheelchair user/mobility difficulties
- 5 Personal care support
- 6 Mental Health difficulties
- 7 An unseen disability (e.g. diabetes, asthma, epilepsy)
- 8 Multiple disabilities
- 9 A disability which is not registered above.

### **Criminal convictions**

You must tick the 'yes' box if you have a conviction, not including:

- a motoring offence that you received a fine or similar penalty for; or
- a spent sentence (as defined by the UK Rehabilitation of Offenders Act 1974), except for certain courses (see below).

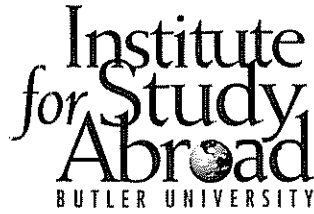
If you have not been convicted of a criminal offence, you must tick the 'No' box

If you tick the 'Yes' box, we shall ask you to send more details.

If you are not sure whether to tell us about a previous conviction, you should get more advice from your local Citizens Advice Bureau or probation service, or from NACRO (the National Association for the Care and Resettlement of Offenders). You can also contact a solicitor, but you may have to pay for legal advice.

**If you do not tick either the 'Yes' or 'No' box, we cannot process your form.** We will contact you to get the information, but this will delay your application.

If you are convicted of a criminal offence after you have applied you must inform us.



**UNIVERSITY OF STIRLING: ADDITIONAL APPLICATION QUESTIONS**

Do not answer these questions unless you have carefully read the instructions in the attached sheets.

1) Ethnicity code: \_\_\_\_\_

2) Occupational background: \_\_\_\_\_

3) Disability code: \_\_\_\_\_

Do you have any Disabilities/Special Needs? Please indicate any arrangements or facilities you may require (attach additional sheets if necessary):

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4) Do you have any criminal convictions? Yes \_\_\_\_\_ No \_\_\_\_\_

5) Regarding your university accommodation: give any details of any medical condition which might merit special consideration (attach additional sheets if necessary):

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Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return this form to IFSA-Butler in a sealed envelope with your name and signature on the back.**