

APPLICATION FORM 2025 – 2026

This form can be used to apply for courses at all campuses.
Please complete all sections digitally or in capital letters using a black pen.



Office Use only

Student ID:

Unique Learner Number:

Section 1: Personal Details (Please provide your Legally Registered names)

Title (e.g Ms/Mrs/Miss/Mr/Dr/Mx)

First name(s)

Surname (Family name)

Preferred Forename

Date of Birth (DDMMYYYY)

D

D

M

M

Y

Y

Y

Y

Legal Sex Male ☐ Female ☐ Age on 31 August 2025

Gender Identity (This is how you choose to identify yourself) Male ☐ Female ☐ Trans Male ☐ Trans Female ☐ Non-Binary ☐ Prefer not to say ☐ Other ☐

Current Address

Postcode

Telephone: Home

Applicant Mobile

Applicant Email

Last School Attended (under 19 only)

Are you in care or a care leaver?

Y

N

Are you a carer?

Y

N

Section 1.1: Ethnicity (How would you best describe yourself)

White ☐ English/Welsh/Scottish/
Northern Irish/British ☐ Irish ☐ Gypsy or Irish Traveller ☐ Any Other White Background ☐

Mixed/Multiple Ethnic Group ☐ White and Black Caribbean ☐ White and Black African ☐ White and Asian ☐ Any Other Mixed/Multiple
Ethnic Background ☐

Black / African / Caribbean /
Black British ☐ African ☐ Caribbean ☐ Any Other Black /African/
Caribbean Background ☐

Asian ☐ Indian ☐ Pakistani ☐ Bangladeshi ☐ Chinese ☐ Any other Asian background ☐

Other Ethnic Group ☐ Arab ☐ Any Other Ethnic Group ☐ Not Provided ☐

Section 1.2: Criminal Convictions

ESCG is keen to support students with criminal convictions to help them succeed. Having a criminal record will not necessarily prevent you taking up a place, depending on the circumstances of the offence.

Do you have an unspent criminal conviction? Yes ☐ No ☐

If you are applying for a course in teaching, health, social work, childcare or involving work with children or vulnerable adults, previous criminal convictions may affect your ability to attend work placements and possibly achieve your course.

Do you have a spent criminal conviction? Yes ☐ No ☐ (Only complete this question if
applying for a relevant course.)

If you have declared an unspent or spent criminal conviction you will receive a letter with an attached form. You will have 10 days to return the form to the Designated Safeguarding Lead who will review your disclosure. During this time your application/enrolment will be placed on hold pending review of your disclosure. You may be required to come in for an interview to discuss your disclosure further.

Please note that failing to complete this section or providing false information may lead to your application/enrolment being withdrawn. Any information you provide the College Group in relation to criminal convictions will only be disclosed to third parties if this is necessary in the interests of the safety and welfare of other students or staff.

If you are unsure about what to declare please seek advice from our Safeguarding Team or we suggest you seek advice from Citizens Advice Bureau or the Probation Service, Youth Offending Team or NACRO – www.nacro.org.uk

Section 1.3: Nationality (Please place a cross in the relevant boxes)

Nationality

Have you been legally resident in the UK for the past 3 years?

Y

N

Do you have the right to study and work in the UK?

Y

N

Date of entry to the UK

D

D

M

M

Y

Y

Y

Y

Section 2: Disabilities and Learning Difficulties

Do you consider yourself to have a learning difficulty and/or disability and/or medical condition (including severe allergies)

Y

N

Do you think that you may need additional support whilst attending college?

Y

N

Do you have an Education, Health and Care Plan?

Y

N

Please tick all that apply, that you wish to record, below. Please supply us with a copy of any relevant documentation.

04

Vision impairment

05

Hearing impairment

06

Disability affecting mobility

07

Profound complex disabilities

08

Social and emotional difficulties

09

Mental health difficulty

10

Moderate learning difficulty

11

Severe learning difficulty

12

Dyslexia

13

Dyscalculia

14

Autism Spectrum Condition

16

Temporary disability after illness or accident

17

Speech, language and communication needs

93

Downs Syndrome

94

Other specific learning difficulty

95

Other medical condition

96

Other learning difficulty

97

Other Disabilities (Please specify)

From the list above, please state, which is your primary/most significant learning difficulty/disability _____

Section 3: Prior attainment level and qualifications on entry (Please indicate below the level of your highest qualification)

99

No previous qualifications

09

Entry Level (Certificates in Adult Literacy & Numeracy, and Entry Level Functional Skills)

01

Level 1 (GCSE at grades D-G/3-1 (or fewer than five at grades A*-C/9-4), NVQ/BTEC Level 1 and Level 1 Functional Skills)

Level 2 (Vocational & Technical quals at level 2 (not on list of entitlements), Functional skills level 2, ESOL)

02

Full Level 2 (GCSE (five or more at grades A*-C/9-4), one A-Level/2 or 3 AS-Levels, BTEC First Diploma, Level 2 NVQ, or a Level 2 in Functional Skills))

Level 3 (Vocational & Technical quals at level 3 (not on the list of entitlements), Pre U qualifications, Technical qualifications (part of T-Levels)

03

Full Level 3 (Two or more A-Levels/four or more AS Levels, NVQ Level 3, Diploma Level 3, or Access to HE Diploma)

04

Level 4 (HNC, Certificates of Higher Education, Teaching Qualifications, or NVQ Level 4)

05

Level 5 (Foundation Degree or HND)

06

Level 6/7+ (Bachelor's Degree, Master's or PGCE)

97

Other qualification Please specify: _____

Please list all the qualifications you will have or will be taking before the start of the course. For adults, please list qualifications relevant to the course you are applying for. Continue on a separate sheet if necessary.

Qualification Type (e.g. GCSE)	Awarding Body (e.g. Edexcel)	Subject (e.g. Maths)	Predicted Grade	Grade (if completed)	Date Completed

Section 4: Your choice of course

Course Code	Course Title (list all subjects if A-Levels)	Course Campus	Order of Priority
			1
			2
			3

Do you wish to apply for an Apprenticeship?

Y

N

 If yes, please specify subject area: _____

Please tick if you have an employer who is willing to take you on as an apprentice ☐

Section 5: Career Plans, other interests and experience (Please use this section to tell us about yourself. Continue on a separate sheet if needed)

Career aims:

Work experience/other activities/interests:

Section 6: Signature

Signature of applicant:

Date:

D

D

M

M

Y

Y

Y

Y

Signature of parent/guardian:
(if applicant is under 18)

Print name:

Parent/guardian contact details:
Email:
Telephone:

Data Protection and your personal information (how we use your personal information)

Information processed in accordance with the Data Protection Act. East Sussex College Group will collect and process your personal data under GDPR Article 6e (Public Task) in order for us to carry out our public task of providing education and training. The Privacy Policy can be found at: www.escg.ac.uk/policies

Please tick the following boxes if you DO wish to be contacted about:

New courses/learning opportunities ☐

Surveys and research ☐

To finish your application, please return this form to Admissions at:

To study an Eastbourne course:
East Sussex College Group
Cross Levels Way
Eastbourne, BN21 2UF

To study a Hastings course:
East Sussex College Group
Station Plaza
Station Approach
Hastings, TN34 1BA

To study a Lewes course:
East Sussex College Group
Mountfield Road
Lewes, BN7 2XH

To study a Newhaven course:
East Sussex College Group
Marine Workshop
Railway Approach
Newhaven, BN9 0ER