



Please complete ALL sections of this form clearly AND ACCURATELY. If information is missing we will not be able to process your application. Please email your completed application and supporting documents to admissions@cuof.edu

Section 1: Your course

Full title of course (including Foundation, BA/BSc, MA/MSc):

Month and Year of Entry:

☐

Jan-June

☐

Jul-Dec

20

How do you wish to study?

☐

Full-time

☐

Part-time

Section 2: Your personal details

Your first name (as written in your passport):

Your surname (as written in your passport):

Your title:

☐

Mr

☐

Mrs

☐

Miss

☐

Ms

☐

Dr

☐

Professor

Other

Gender:

☐

Male

☐

Female

Date of birth (DD/MM/YYYY):

Nationality:

Permanent postal address (Including country/postal code):

Your personal mobile number (Including country code)

Alternative mobile number

Your personal email address:

Employer Details

Current Employer

Employer Contact Number

Section 3: Visa

Which country are you currently living in?

Will you require a visa to study in USA?

☐

Yes

☐

No

Section 4: English language qualification

Qualification/Name of Test:

Overall result (Please state the highest English Language Qualification that you have currently. Valid qualifications include GCSE English (grades A - C), IELTS or equivalent):

Section 5: Academic history

Your education in your home country normally from the age of 16 (e.g. high school, A level, etc), starting with the most recent qualification first.

Schools attended	Date started MM/YYYY	Date finished MM/YYYY	Examinations taken and qualifications obtained	Grade

Please provide details of any previous courses you studied, the dates and the institution.

Institution attended	Date started MM/YYYY	Date finished MM/YYYY	Examinations taken and qualifications obtained	Grade

Section 6: Other information

The University welcomes applications from disabled international students and we encourage you to declare your disability and your support needs as soon as possible. Telling us about your disability will not affect your selection as a student, but will enable us to work with you to assess your needs, plan your stay at the University and inform you to what extent we can meet your requirements.

Do you have a disability or medical condition that require any additional support?

☐

Yes

☐

No

Section 7: Representation

Are you applying through an Agent or Educational Representative?

☐

Yes

☐

No

Agent's/Educational Representative name:

Agent's/Educational Representative address (including Country & post code):

Agent's/Educational Representative email address:

Please tick the box to give consent for the agent to act on your behalf regarding your application for admission to Crestwood University of Florida and to confirm that you understand and agree to the following conditions:

The agent will be acting on my behalf and not on the behalf of CUOF and thus unable to contract on behalf of, or bind, CUOF. The Agent will hold and process information solely for the purpose of my application to CUOF and all communications will be sent to my nominated Agent's email address. Any notice to amend or cancel the Agent who is acting on my behalf must be communicated by me in writing to both the Agent and CUOF. A Change of Agent form must be completed and returned to the International Admissions office if I choose to change Agent, and will be effective once received by CUOF.

☐

I agree

Will your study be funded in part or full by a sponsor?

☐

Yes

☐

No

Sponsor's name:

Sponsor's address (including Country & post code):

Sponsor's email address:

CUOF

If yes, please tick the box to give your consent for CUOF to pass information about your application and to your sponsor.

☐ I agree

Please tick the box for CUOF to pass information about your application on to relevant authorities.

☐ I agree

Section 8: Declaration

By submitting this form I declare that, to the best of my knowledge, the information I have provided is correct. If enrolled, I agree to abide by the Regulations in force at the time.

Signed

Date

Next steps

If you do not have all supporting documents available at the time of application, we will still be able to make you a conditional offer.

Please tick the boxes and attach the documents which you currently have available to support your application:

Academic transcripts

☐ Yes ☐ No

Attach all your academic transcripts from your education since the age of 16.

Personal statement

☐ Yes ☐ No

Provide a statement, explaining why you wish to study this course, what skills and knowledge you have, your longer term career aspirations, and any additional information to support your application.

Your references

☐ Yes ☐ No

One reference is required to support undergraduate study and two references for postgraduate study.

Work Experience

☐ Yes ☐ No

Provide details of all the jobs you have held (if any) since the age of 18. A CV is also acceptable.

Passport copy

☐ Yes ☐ No

Please attach a copy of your current passport.

English Language Evidence

☐ Yes ☐ No

Portfolio

☐ Yes ☐ No

Please note some courses may also require you to submit a portfolio or audition.

CUOF will use all reasonable endeavors to deliver courses and programs of study as communicated to the students, and at the fee payment structures and e-levels published. It is possible, however, that some changes may occur and the University reserves the right to make variations to the content or method of delivery of courses, to discontinue or combine courses, to introduce new courses or to adjust fee payment structures or fee levels if at any time such action is considered to be reasonable and necessary. I confirm that I have read and understood the terms and conditions governing the fee payment structures and fee levels for courses and programs. I hereby apply for enrollment and if accepted, I agree to comply with the standard rules, regulations and ordinances of CUOF. If I do not comply with any of the rules of the University, the University has the right to take disciplinary action against me.

☐ I agree