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 Academic Services • Gwasanaethau Academaidd
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**APPLICATION FOR THE MASTER OF ARTS DEGREE IN THEATRE DESIGN
 SEPTEMBER 2011**

TITLE / NAME / CONTACT DETAILS		FURTHER DETAILS	
Title:		Date of Birth:	
Surname / Family Name:		Gender:	
Forenames:		Nationality:	
Correspondence Address:		Country of Birth:	
Postcode:		Date of first entry to live in UK:	
Tel. No:		Area of Permanent Residence:	
Dates at this address:		Local Education Authority:	
Home Address (if different):		Next of Kin:	PLEASE ATTACH A RECENT PASSPORT PHOTO OF YOURSELF HERE
Postcode:		Relationship to you:	
Tel. No.		Contact tel no:	
Mobile Tel. No:			
Email address:			
Contact Fax. No:			
Previous Surname / Family Name:			
What is your preferred means of communication? Please tick appropriate box(es):			
Letter	<input type="checkbox"/>	Email	<input type="checkbox"/>
		Other (please state)	<input type="checkbox"/>
<p>The MA Theatre Design is delivered in two parts. Part I is a 1 year full time taught course; upon completion of Part I students are eligible for the award of Postgraduate Diploma. Part II is a Professional Practice Portfolio. In order to apply for Part II of the MA Theatre Design, applicants will have had to either complete the Postgraduate Diploma (Part 1) at RWCMD, or its equivalent in another institution. Please indicate which Part you are applying for:</p>			
PART I 1yr (full time taught course)	<input type="checkbox"/>	PART II (Professional Practice Portfolio)	<input type="checkbox"/>
Forthcoming dates when you will NOT BE AVAILABLE to interview for the College:			
* Please note that interviews are likely to start in March			

Please use this page to give full details of your education and qualifications gained to date, starting with the most recent.

1. HIGHER EDUCATION (College / University) – *Undergraduate & Postgraduate information*

Name of Institution	Dates	Title of Course e.g. BA Hons Degree	Subject/s	Grade / Class	Date Obtained

2. SCHOOL / COLLEGE EDUCATION (Advanced) - *A Levels, Scottish Highers, BTEC, GNVQs etc.*

Name of Institution	Dates	Title of Course e.g. A Level	Subjects	Examining Body	Grade / Class	Date Obtained

3. SCHOOL / COLLEGE EDUCATION (from age 11) - *GCSEs, GCE O Levels, CSEs etc.*

Name of Institution	Dates	Title of Course (e.g. GCSE)	Subjects	Examining Body	Grade / Class	Date Obtained

4. OTHER RELEVANT QUALIFICATIONS OR MEMBERSHIP OF ANY PROFESSIONAL BODIES

Name of Course and Body	Dates	Qualification / Experience gained	Other Relevant Info

5. ON A SEPARATE SHEET, PLEASE WRITE A PERSONAL STATEMENT IN SUPPORT OF YOUR APPLICATION GIVING DETAILS OF ANY EXPERIENCE WITHIN THE THEATRE DESIGN INDUSTRY. This should include positions of responsibility you have held; courses you have attended; professional employment experience; membership of clubs and societies; prizes or awards received; any other relevant information. You may wish to end with a personal statement stating why you have chosen Theatre Design as a career and any other relevant information including the subject of your MA.

6. ON A SEPARATE SHEET, PLEASE SUBMIT A PROFESSIONAL PRACTICE PORTFOLIO PROPOSAL (c. 2000 words) FOR PART II. The focus of this work typically relates to a chosen area of your professional practice.
You only need to complete section 6 if you are applying for Part II. Please attach any additional sheets (for sections 5 or 6) ensuring that your name is clearly visible to this form.

7. SPECIFIC REQUIREMENTS

Please indicate if you have any physical or other disability or medical condition including any which might necessitate specific arrangements or facilities (e.g. dyslexia, diabetes, epilepsy, asthma, partial sight, bronchial complaints and mobility difficulties.) *The information that you supply will be treated in the strictest confidence and will help us to cater for your needs - the College operates on an equal opportunities basis and your application will not be prejudiced by any information that you supply.*

8. PLEASE GIVE THE NAME AND FULL POSTAL ADDRESS OF YOUR CURRENT COLLEGE / UNIVERSITY OR PLACE OF FULL-TIME EMPLOYMENT *If employed, please state nature of work.*

9. LANGUAGES? Please tick appropriate box and complete table for other languages

Language (other than English)	First Language	Second Language	Learner	Not at all
Welsh				

Please state any English Language Qualifications held (for example IELTS, TOEFL) if applicable.

Qualification Title	Level

10. WHAT WAS YOUR MAIN SOURCE(S) OF INFORMATION ABOUT THE COLLEGE? Please tick.

Our Prospectus		Our Website		School / college		Careers advisor	
Own knowledge		Word of Mouth		Other (<i>please specify</i>)			

11. PLEASE GIVE DETAILS OF ANY OTHER COURSES THAT YOU ARE APPLYING FOR:

Institution:				
Course:				

12. Please state if you have a criminal conviction. Please Tick.

Yes		No	
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**Relevant convictions are those for offences against the person, whether of a violent or sexual nature, and convictions for offences involving unlawfully supplying controlled drugs or substances where the conviction concerns commercial drug dealing or trafficking. Convictions that are spent (as defined by the Rehabilitation of Offenders Act 1974) are not considered to be relevant. If you tick yes, you may be required to provide further details.*

NOTE: For courses involving work with children or vulnerable adults, any criminal convictions, cautions (including verbal cautions), reprimands, final warnings and bind-over orders are exempt from the Rehabilitation of Offenders Act 1974

13. Declaration: I confirm that the information given on this form is true, complete and accurate.

If the Royal Welsh College of Music & Drama has reason to believe that I or any other person has given false information or have omitted any information requested in the application form, or made any misrepresentation, the College will take whatever steps considered necessary to establish the authenticity of my application. I accept that if I do not fully comply with these requirements, the College reserves the right to cancel my application and I shall have no claim against the College.

Under the Data Protection Act 1998 we must seek your consent in order to hold and process personal information about you.

The information that you provide

- is for academic and administrative purposes and will only be disclosed to staff who have responsibility for these areas
- may be used for statistical analysis and monitoring by the College
- may be used under the College's requirement to return data to statutory agencies, including the Student Loans Company.

By signing below, you give your consent to the processing of this information for these purposes.

SIGNATURE OF APPLICANT: **DATE:**

If submitting an electronic copy please check the box to give your consent to the processing of this information for the above purposes

Please ensure that you have attached the following items to your application form : passport photo, personal statement and (if applying for Part II) research proposal. *Incomplete application forms will not be considered.*

Please forward the completed form with enclosures to the person who will act as your referee. Ask them to complete the section below and post it to Admissions at the address shown on the front of the form.

We may not be able to consider applications that reach us after 31 March.

PERSONAL REFERENCE FOR: _____

The Royal Welsh College of Music & Drama would be grateful for your comments in support of this application and in particular on the applicant's potential for this course. Please offer an assessment of the applicant's achievement in both academic (*where appropriate*) and practical areas, the applicant's personal qualities and anticipated examination results (*where applicable*). If you do not have first hand knowledge of the applicant's academic potential, please comment on his / her practical work. **Your cooperation is much appreciated; the College depends greatly on the advice of referees and all information is treated with absolute confidence.**

REFEREE DETAILS	
Name:	Position:
Address:	Telephone:
	E mail:
Signature:	Date

EQUAL OPPORTUNITIES - Applicant Monitoring Slip

The following questions are designed to help us monitor the effectiveness of our Equal Opportunities Policy and will be used for no other purpose. The information is completely confidential and **WILL NOT** be used in the selection process.

Please complete the details below and return with your application form.
 Thank you for your assistance.

Course applied for:	MA Theatre Design	
Surname:		
Forenames:		
Date of birth:		Age:

Please tick the appropriate boxes:

I am: Female Male

I am: A fluent Welsh speaker A Welsh speaker, but not fluent
 Not a Welsh speaker

Would you prefer to receive communications from the College through the medium of Welsh, where available? Yes No

Do you have a disability or a particular need? Yes No

Do you need any equipment or support to enable you to attend an audition/interview or other selection process? Please specify (this will help to ensure that you are fully enabled to give your best at audition/interview). _____

What is your ethnic group?

Choose one section from A to E, then tick the appropriate box to indicate your background.

A <input type="checkbox"/> White [10] B Black or Black British <input type="checkbox"/> Caribbean [21] <input type="checkbox"/> African [22] <input type="checkbox"/> Other Black background [29]	C Asian or Asian British <input type="checkbox"/> Indian [31] <input type="checkbox"/> Pakistani [32] <input type="checkbox"/> Bangladeshi [33] <input type="checkbox"/> Chinese [34] <input type="checkbox"/> Other Asian background [39]	D Mixed <input type="checkbox"/> White and Black Caribbean [41] <input type="checkbox"/> White and Black African [42] <input type="checkbox"/> White and Asian [43] <input type="checkbox"/> Other mixed background [49] E Other <input type="checkbox"/> Other ethnic background [80] <input type="checkbox"/> Prefer not to say [98]
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