

**University Centre for  
Academic English  
English Winter  
Programme**

**APPLICATION FORM 2025**

| PERSONAL DETAILS   |   |      |
|--|---|------|
| Family (Last) Name:  | Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Prof <input type="checkbox"/> Dr <input type="checkbox"/> |      |
| First (Given) Name(s):   | Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>   |      |
| Passport Number:   | Date of Birth (dd/mm/yy):   | Age: |
| Nationality:   | First Language:   |      |
| Country of Birth:  | Occupation:   |      |
| Country of Permanent Residence:  |   |      |
| Home address of applicant:   |   |      |
| Post/Zip Code:   | Country:  |      |
| Telephone:   | E-mail:   |      |
| Address for CORRESPONDENCE (if different from home address): <b>**If applying via an agent, please confirm Agent details here**</b>  |   |      |
| Post Code:   | Country:  |      |
| Telephone:   | E-mail:   |      |
| Do you have a Disability / Special Needs? Yes <input type="checkbox"/> No <input type="checkbox"/>   |   |      |
| <b>Additional information regarding your special needs:</b><br><br><i>The information you provide will be used in the processing of your application to assess whether we have the facilities to support your need, or to assess whether your situation may put yourself or others in danger. Such details will only be disclosed to those having legitimate need to see them.</i> |   |      |
| Have you previously applied to the University of Manchester? Yes <input type="checkbox"/> No <input type="checkbox"/>  |   |      |
| The University of Manchester ID (if known):  |   |      |

| Course Start Date: | Start Date: | End date: | Number of study weeks in total:   |
|--------------------|-------------|-----------|-----------------------------------|
|                    |             |           | Length of study (3 weeks minimum) |
|                    |             |           |                                   |

**ENGLISH LANGUAGE LEVEL**

This course is for students at INTERMEDIATE LEVEL and so must already have achieved a minimum of IELTS 4.0 overall (or acceptable equivalent at A2 on the CEFR). Please note this course is also not suitable for students with an English level of above IELTS 6.5 or equivalent.



**I have previously passed an English Language test (e.g. IELTS, TOEFL iBT, PTE) and enclose a copy of my certificate.**

Name of test:

Date of test:

Results:

**Overall:**

**Listening:**

**Reading:**

**Writing:**

**Speaking:**



**I have never taken an English Language test. I estimate my levels to be:**

Reading:

Basic user

☐

Writing:

Basic user

☐

Listening:

Basic user

☐

Speaking:

Basic user

☐

Independent user

☐

Independent user

☐

Independent user

☐

Independent user

☐

Proficient user

☐

Proficient user

☐

Proficient user

☐

Proficient user

☐


**I am currently attending an English language course**

Name of school/college/university:

Level of course:

**COURSE FEES**

**It is vital that you have the fees to pay for your tuition fees and living expenses for the duration of your studies. Please give details of how you will fund your studies**



My course fees will be paid by myself /family. I will pay the course fees by the deadline date given.



My course fees will be paid by my sponsor. I enclose a sponsorship letter / financial guarantee.

The name of my financial sponsor is:

My sponsor file / reference number is:

**MARKETING**

**How did you hear about the University Centre for Academic English (UCAE)**

Educational Agent

☐

UCAE Website

☐

A Study Abroad Guide

☐

Search engine (e.g. Google):

☐

Other:

☐

Name of agent is:

Please give details:

**GENERAL DATA PROTECTION REGULATIONS**

["Privacy Notice"](#) for guidance to the University's data protection regulations.

**DECLARATION**

**I enclose with this application:** (please indicate)

- *A copy of my passport and current visa (if applicable)* ☐
- *Evidence of my English language level (e.g. copies of IELTS/TOEFL iBT/PTE test results)* ☐
- *A certified sponsorship letter or financial guarantee stating payment for English language course (sponsored students only)* ☐

**BY COMPLETING, SIGNING AND SUBMITTING THIS APPLICATION FORM, YOU ARE CONFIRMING THAT YOU HAVE READ AND UNDERSTOOD THE BOOKING CONDITIONS**

**Signature of applicant:**

Date: (dd/mm/yy)

Name of person signing on behalf of applicant (eg Agent):

**Signature:**

Date: (dd/mm/yy)

**Contact Telephone:**

**Contact Email:**