

LIFE IN THE UK AND ISLANDS TEST 2024

University College Isle of Man - Homefield Road, Douglas, Isle of Man IM2 6RB | mail@ucm.ac.im | 01624 648200 | www.ucm.ac.im

PLEASE NOTE: You must have a valid passport to make an application and this must be brought with you when you apply for the test and also on the day of your test.

DATE OF EXAM: 27 June 2024 - 10.30am

DEADLINE TO SUBMIT APPLICATION: 13 June 2024

Take the completed form to reception at University College Isle of Man with the application fee of £85. This can be paid by credit card or debit card or cheques payable to the Isle of Man Government.

Please bring your current passport to the University College Isle of Man reception when you submit your application.

Please write clearly in block capitals, to ensure your examination entry details are correct.

The details must match your current passport. If you have any difficulties completing the form, contact exams@ucm.ac.im or telephone 648200.

| | | | |
|---------------|---------------------------------|--------|----------------------|
| Title | <input type="text"/> | Gender | <input type="text"/> |
| Surname | <input type="text"/> | | |
| Forename(s) | <input type="text"/> | | |
| Date of birth | <input type="text"/> | | |
| Address | <input type="text"/> | | |
| Postcode | <input type="text" value="IM"/> | | |

Please be aware that all correspondence from UCM will be sent to the email address provided below, including booking confirmations and notifications of results. They will not be posted.

| | |
|----------------|----------------------|
| E-mail | <input type="text"/> |
| Contact number | <input type="text"/> |

Passport details

| | | | |
|-----------------|----------------------|--------------|----------------------|
| Nationality | <input type="text"/> | | |
| Passport Number | <input type="text"/> | Expiry Date | <input type="text"/> |
| Date Issued | <input type="text"/> | Place Issued | <input type="text"/> |

We advise you to make and confirm your entry as early as possible. An email confirmation of your entry will be sent to you 1 week before your assessment. Please sign to confirm that you are aged 18 years or above and that the information you have provided in this application is correct and accurate to the best of your knowledge and belief:

Signed _____ Date _____

TOTAL FEE PAYABLE

£85.00

PLEASE READ THE NOTES FOR CANDIDATES AND COMPLETE THE DECLARATION ON THE REVERSE OF THIS APPLICATION FORM

If you have any access arrangements, please contact us as soon as possible.

If you have any specific needs that will need to be accommodated, within the rules defined by the Exam Board regulations, e.g. access arrangements, please attach appropriate evidence to support your application.

NOTES FOR CANDIDATE

1. Applications to enter the examination must be submitted to reception at UCM, completed and paid in full by the deadline stated above. No requests for entries will be accepted after the deadline has passed.
2. Any request for amendments or additions to exam arrangements made after the exam entry has been booked, will incur an additional administration fee of £50.
3. UCM reserves the right to decline any request for entry to an examination without cause to prioritise the needs of the staff and students of UCM.
4. You must bring your current, valid passport with you to the test. Photocopies are not acceptable. If you are unable to do this, you should contact us immediately as your examination may need to be deferred and you will be charged for a new exam booking.
5. Candidates are required to follow the UCM Exams Service Charter and adhere to all rules and regulations set by UCM and the Awarding Body. Any form of abuse or misconduct may result in you being removed from UCM and denied any opportunity to sit further examinations. A copy of the charter is available upon request or from www.ucm.ac.im.
6. No refunds will be given once an examination entry has been processed.
7. The exam time and date cannot be changed after your booking has been accepted. Should you wish to book an alternative date, you must complete and pay for a new test application.
8. Refunds will not be given in cases of non-attendance at an examination.
9. In the event that physical exams are suspended due to events beyond the control of UCM, such as the Covid pandemic, please note that your entry may be withdrawn and refunded.
10. You will be notified via email of the outcome of your test within 7 days. A written confirmation of passing will be provided with certificates.

DECLARATION

By submitting this form I agree that:

The information I have supplied is correct to the best of my knowledge, I agree to abide by UCM's Student & College Agreement, Code of Conduct and ICT User Agreement (which can be found as www.ucm.ac.im) and I understand that any personal data submitted on the application form will be processed for the purposes of education and training administration, including analysis for management and statutory returns.

Any information will be processed by UCM in accordance with the General Data Protection Regulations (GDPR) 2018 and will be disclosed where relevant to third parties for the purposes of education and training and examinations.

Personal data will be kept whilst still relevant to the original purpose for which it was collected and in accordance with the limitation periods enshrined within the GDPR 2018.

Criminal Conviction Disclosure

Have you ever been convicted in a criminal court, or cautioned, or bound over to be of good behaviour for an offence (not including motoring offences), offences under the Income Tax Act 1970 and offences under the Social Security Administration Act 1992? **YES NO**

Please note that you do not need to disclose convictions which are considered to be 'spent' pursuant to the Rehabilitation of Offenders Act 2001. Please note that if your answer is yes, you should provide details of the date and type of conviction together with any sentence. We will treat all such disclosures as confidential.

By ticking this box, I agree with all of the above statements (to be completed in all cases)

| For office use only | | Method of payment | |
|------------------------|-----------------------------|-------------------|--------------|
| Date request received: | Entry made by Exams Office: | Receipt number: | Amount paid: |
| | | | |