



## Inspired Hair Academy

106 Church Street, Highbridge, Somerset TA9 3HW  
01278 765843

# Application Form

### 1: Personal Details

First Name		Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Last Name		Date Of Birth	__/__/__
Address		Postcode	
Phone Number		Mobile	
Email			
Emergency Contact Name		Phone Number	
Relationship			

### 2: Status

Nationality (home country where you have lived majority of the last 3 years)	
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### 3: Ethnic Origin

L&F Inspired Hair Academy is committed to equal opportunities, and welcomes all students regardless of age, gender or ethnic origin. Please tick the box which describes your ethnic origin.

Asian / Asian British		Black / Black British		Mixed		White		
Bangladeshi		African		White & Asian		White British		
Indian		Caribbean		White & Black African		Irish		
Pakistani		Other Black background		White & Black Caribbean		Any Other White		
Other Asian background		Any Other		Any Other Mixed				
Chinese								
							Prefer not to say	

### 4: Additional Support

Disclosure of a disability is to enable us to assess any additional support needs. The academy wants to ensure that you are able to participate as fully as possible in your chosen program of study. In order for us to provide support please disclose any disability in the space below. If no disability please tick the box.	No Disability
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### **5: Courses**

Please list all the courses you wish to study.

Course Title	Start Date/Time	Tuition Fee

### **6: Educational Qualifications**

Please list all qualifications and schools/colleges attended

Qualifications	Schools/colleges attended

### **7: Feedback**

How did you hear about the course?

Newspaper	Friend/family	Careers office	School
Prospectus	Open day/evening	Website	Other

### **8 Fees:**

Who is paying for your fees?

I am paying for my fees myself	My employer is paying my fees directly	I am applying for government funding for my fees
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### **9: Additional Course Fees & Tuition Fees**

All additional fee & tuition fees must be paid at time of induction.

### **10: Data Protection Consent To Process Declaration**

I declare that the information given on this form is, to the best of my knowledge correct. I agree to abide by L&F Inspired Hair Academy regulations, and to notify the academy of any changes to details.  
I understand that if I have declared false information, action may be taken to reclaim the tuition fee and any associated costs occurred by the academy from me.

Signature

Date

National Insurance Number

### **Please return completed form to:**

L&F Inspired Hair Academy LTD Admissions Department  
106 Church Street, Highbridge, Somerset TA9 3HW