THE PRINCE SUMMER PROGRAMME

Application Form



Instructions to Applicants

Please complete all sections of the form. Please write clearly and in BLOCK CAPITALS. If you are under 18 at the time of making this application, this form must be signed by your parent or guardian.

Personal Details

Family Name		First Name(s)	
Date of Birth(day / month/year)	/ /	Male Female	
Nationality	Country of Birth	Passport Number	
Age	School Grade / Year		
Correspondence Address			
Contact Number		Email	
School Name		City of School	

Which programme you are taking? Please tick whichever is applicable:

Programme	Pathway
The Prince Summer Part 1	Science / Business
The Prince Summer Part 2	Science / Business

Please note: All payments are NON-REFUNDABLE in whatsoever situation, including the student absent from the exam sittings.

Are you interested to further study at City College Plymouth after completing your high school studies?



No 💮















Declaration by the Student

understand that I will applying subjects as ticked ab	oove for the Prince Summer Programme.
Student Name (in full)	_
Applicant's Signature	Date
Declaration by the Parent / Guardian	
If the candidate is under the age of 18 at the time of r consent to my son / daughter applying subjects as ti	making this application I (the applicant's parent or guardian) cked above for the Prince Summer Programme.
Parent / Guardian Name (in full)	
Signature	Date
Data Protection	
the General Data Protection Regulation 2018. I und	processing my personal data, including special category data, under erstand the College also processes my personal data as part of e, to comply with legal and statutory obligations and to ensure
	ge processes my personal data which are contained in the College's ww.cityplym.ac.uk/privacy-notices. By signing this form you hereby ata Protection Regulations 2018.
Applicant's Signature	Date
Please Return Your Completed Application Form	to:



theprincesummer@pd-vl.com











