

# CATASTROPHE ON CAMPUS APPLICATION FORM 2018/19

There are three sections to this application form:

- Section 1: To be completed by the student
- Section 2: To be completed by parents/carers
- Section 3: To be completed by a teacher

The deadline for applications is **Monday 25 June 2018**. Please return to your teacher before this date.  
You will be informed if you have been selected for the programme by **Monday 2nd July 2018**.

If you have any questions about the programme or the application form please contact [wp@surrey.ac.uk](mailto:wp@surrey.ac.uk)

## SECTION 1: TO BE COMPLETED BY THE STUDENT

### ABOUT YOU

Full Name

Date of Birth  /  /  Address

Postcode

School

Email

*This will be used to contact you throughout the programme and to sign you up to the Brightside mentoring platform.*

Gender  Female  Male  Other  Prefer not to say

Are you planning to go to university?  Yes  No  Unsure

If yes, what type of course you are interested in?

### YOUR APPLICATION – PERSONAL STATEMENT

Please include information about:

- Why you wish to be part of the Year 10 Programme
- Your ambitions for the future
- Your GCSE target grades and predicted grades for English, Maths and Science

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*Continue on a paper sheet if needed*

### YOUR DECLARATION

Catastrophe on Campus is a sustained engagement programme and requires attendance at each session.  
Failure to attend may result in your removal from the programme.

If selected for this programme I will be committed to attend every session.

Signed  Date  /  /

## SECTION 2: TO BE COMPLETED BY THE PARENT/CARER

### PARENT/CARER DETAILS

We may use these details to verify any information or in the event of an emergency.

Name of parent/carer (Adult 1)

Relationship to applicant

Occupation

Mobile telephone

Email address

Please tick this box if you are a single parent family. If not, please fill in the second parent information box

Name of parent/carer (Adult 2)

Relationship to applicant

Occupation

Mobile telephone

Email address

Are either of the adults mentioned above retired or unemployed? (please tick)

Adult 1  Retired  Unemployed

Adult 2  Retired  Unemployed

Did either of the adults mentioned above go to university? (please tick)  Adult 1  Adult 2  Neither  Both

### ABOUT YOUR CHILD (PLEASE ANSWER ON BEHALF OF YOUR CHILD)

How would your child describe their ethnic origin?

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> White                                  | <input type="checkbox"/> Asian - Indian           | <input type="checkbox"/> Black - African    |
| <input type="checkbox"/> Gypsy or Traveller                     | <input type="checkbox"/> Asian - Pakistani        | <input type="checkbox"/> Black - Caribbean  |
| <input type="checkbox"/> White/Black Caribbean                  | <input type="checkbox"/> Asian - Bangladeshi      | <input type="checkbox"/> Black - other      |
| <input type="checkbox"/> White/Black African                    | <input type="checkbox"/> Asian - Chinese          | <input type="checkbox"/> Arab               |
| <input type="checkbox"/> White and Asian                        | <input type="checkbox"/> Asian - other background | <input type="checkbox"/> Other ethnic group |
| <input type="checkbox"/> Other mixed/multiple ethnic background |   |   |

Is your child a young person in local authority care or a care leaver?

Yes  No

Is your child eligible for free school meals?

Yes  No

Is your child looking after someone? (Does your child look after a family member or friend who has a disability, long term illness, mental health problem or is affected by substance misuse?)

Yes  No

Is your child from a military family?

Yes  No

Does your child have any of the following? (Does your child have a disability, long term health problem or special requirement which affects their daily life?)

- |   |   |
|---|---|
| <input type="checkbox"/> Aspergers/other Autistic Spectrum Disorder | <input type="checkbox"/> Specific Learning Difficulty eg Dyslexia |
| <input type="checkbox"/> Blind/Partially Sighted                    | <input type="checkbox"/> Physical Impairment/Mobility Issues      |
| <input type="checkbox"/> Deaf/Hearing Impairment                    | <input type="checkbox"/> Multiple Disabilities                    |
| <input type="checkbox"/> Long Standing Illness                      | <input type="checkbox"/> A disability not listed above            |
| <input type="checkbox"/> Mental Health Condition                    |   |

## SECTION 2: TO BE COMPLETED BY THE PARENT/CARER

### ABOUT YOUR CHILD (CONTINUED)

We wish to make the Year 10 Programme an enjoyable and accessible experience for all participants involved. Therefore, please provide us with information on any special requirements that you would like us to be aware of in the table below, continuing on an additional sheet if necessary. This includes special educational needs, disabilities, long term medical conditions, allergies, or dietary requirements that your child may have. We will endeavour to provide additional support where possible and within reason.

**Special Educational Needs or Disabilities** (Including specific learning difficulties such as dyslexia, dyspraxia and dyscalculia)

Yes  No

If yes, please provide more information on how we can support your child during the programme

**Medical Conditions/Allergies**  Yes  No

If yes, please provide more information on how we can support your child during the programme

**Special Requirements** (Dietary, Religious)

Yes  No

If yes, please provide more information on how we can support your child during the programme

**Other**

Yes  No

If yes, please provide more information on how we can support your child during the programme

**Parent/Carer Requirements**

Please let us know if either parent/carers mentioned above have any requirements that we should be aware of for their visits to campus (eg, dietary, mobility requirements) we will endeavour to provide support and/or reasonable adjustments where possible.

Yes  No

If yes, please provide more information on how we can support your child during the programme

### TRANSPORT

If required, the university can arrange transport for your child to attend these sessions. Please let us know if you would like us to arrange for a taxi or minibus to collect your child (and parents/carers on the days they are invited). We may ask that your child travels to a hub location (for example their school or a local landmark) to meet the transport provided.

Yes  No

If yes, please let us know if there is any additional information we may need to know

All taxis and minibuses used are approved to transport unaccompanied young people.

## SECTION 2: TO BE COMPLETED BY THE PARENT/CARER

### DATA PROTECTION

**Data Protection:** Student data is collected to help us monitor the targeting and take up of activities and to track students who apply to Higher Education Institutions in the future. The data will be stored on a database (in accordance with the Data Protection Act 2018) used to administer participation in the project. For research and monitoring processes we will undertake long-term tracking of participants' education journeys, to monitor their participation in our activities and progression to Higher Education.

This data may be shared with the Higher Education Funding Council (HEFCE), the Department for Education, the Office for Students, Higher Education Statistics Agency (HESA), the University and Colleges Admissions Service (UCAS), Higher Education Access Tracker (HEAT) subscribers, Connexions, Brightside Trust, National Data Service and our partners in the Higher Education Outreach Network (HEON) based at the University of Surrey to help evaluate the effectiveness of our activities and the broader government policy to widen participation in Higher Education and to develop future policy.

The project and its partners will not use your record in a way that

would affect you individually. We will not release data to anyone who is unauthorised. You have the right to opt out of sharing your data at any time, please contact Katherine Sela ([k.sela@surrey.ac.uk](mailto:k.sela@surrey.ac.uk) or **01483 689878**) to do this. Under the Data Protection Act 2018 you have the right to a copy of the data held about you by us. If you have any concerns about the use of data for these purposes or would like a copy of the data you have supplied directly to us, requests should be made in writing using the contact information at:

[surrey.ac.uk/information-management/data-protection](https://surrey.ac.uk/information-management/data-protection)

**Online Mentoring:** Your child will be introduced to their Student Mentor on the first Saturday of the Year 10 Programme. They will offer your child support, information and guidance throughout the programme both in person, at the Year 10 Programme events and via Brightside; a secure online mentoring platform.

Mentors are University of Surrey students who have been carefully screened and trained to help young people succeed through their education and into work or university.

Please tick a box

I have read and understood the Data Protection statement and how data will be used for evaluation, research and monitoring purposes  Yes  No

I agree for the data I provide to be shared with the Higher Education Access Tracker (HEAT)  Yes  No

I agree for the data I provide to be shared with the Higher Education Outreach Network (HEON) at the University of Surrey  Yes  No

I understand that I can opt out of sharing my data at any time.  Yes  No

I understand that the University of Surrey has a duty of care to my child whilst they are attending on campus sessions and, as such, I grant permission for the University of Surrey to act appropriately in the event of an emergency, including the administering of first aid treatment. I acknowledge that the University of Surrey will liaise with me directly where possible. Please be aware that the University of Surrey only has a duty of care to your child from the point of handover on the days that the Year 10 Programme takes place.  Yes  No

I grant permission for my child to participate in the mentoring programme run by the University of Surrey and Brightside and to be matched with a mentor.  Yes  No

I agree that all communication between my child and their Student Mentor will be kept confidential and only shared with staff from the Widening Participation and Outreach Department and Brightside. Mentors and mentees will be prohibited from meeting on online platforms other than Brightside. They will also be prohibited from meeting face-to-face, except for organised visits by the University.  Yes  No

I give consent for my child to be photographed/filmed during activities to be used in future publications to promote the activities of the Department of Widening Participation and Outreach at the University of Surrey and shared between programme participants and their parents/carers. I am happy for my child's image to be used in this way.  Yes  No

We expect your child to behave appropriately throughout the programme and attend all sessions. If your child has a problem or is unable to attend a session you should contact the University of Surrey directly. Failure to attend sessions without informing the University beforehand may result in their removal from the programme. Please tick to show you have read and understood the above paragraph.  Yes  No

### PARENT DECLARATION

We may wish to contact you in the future to send useful information, updates about the University of Surrey and for research purposes.

Please tick to confirm you are happy for us to contact you.

I have checked the information within this form and to the best of my knowledge it is correct and true. I understand that I should contact the University of Surrey directly with a problem or if my child is no longer able to attend.

Signature  Date  /  /

Print Name

## SECTION 3: TO BE COMPLETED BY THE TEACHER

Please ensure this section is completed by a teacher or tutor who knows the student. This member of staff will act as a referee and may be contacted to verify any information.

### CONTACT DETAILS

Name of Teacher

Job Title/Post

Subject area

Full School/College name

Day time telephone

Teacher Email address

### PREDICTED GRADES

Are the predicted grades provided in section 1 correct?  Yes  No

If no, please include predicted grades for core subjects (English, Maths and Science) below

Type of qualification	Subject	Predicted grade
Type of qualification	Subject	Predicted grade
Type of qualification	Subject	Predicted grade
Type of qualification	Subject	Predicted grade
Type of qualification	Subject	Predicted grade

We would like to see whether the Year 10 Programme has any impact on GCSE attainment.

For this reason we ask for your commitment to sharing this students GCSE grades in August 2019.

I commit to providing actual GCSE grade results for this student to the University of Surrey's Department of Widening Participation and Outreach

### TEACHERS STATEMENT

Please comment on the following:

- Overall academic ability and general performance at school/college and predicted grades if possible
- Suitability and maturity to attend an intense academic early-university level course
- Why this student may benefit from this type of activity
- Any information you believe will have a bearing on the student's application or which you think would be helpful for us to be aware of (such as family circumstances, aspirations/awareness of HE and potential of student)

*Continue on a paper sheet if needed*

### TEACHER DECLARATION

I have checked the details in this application form and I confirm that, to the best of my knowledge, they are correct and I support this application.

Teachers Signature

Print Name

Date

**Thank you for taking the time to fill in this form and supporting the application process**

**APPLICATION DEADLINE: MONDAY 25 JUNE 2018**