## HERTFORD COLLEGE, OXFORD

# Application Form for July Open Enrollment



Photograph

Three Week Advanced English and British Culture Programme

<u>Sunday 13<sup>th</sup> July – Saturday 2<sup>nd</sup> August 2025</u>

### Application deadline: 2<sup>nd</sup> May 2025

Please return the completed **application form** to your university's international office.

1 PERSONAL DETAILS							
Last Name			First Name			Date of birth	
Address							
City		Country			Pc	stcode	
Phone		E-mail Address					
Nationality		Passport Number					
TOEIC/TOEFL/IELTS/ Other English Exam Score							
University					University Year (1	<sup>t</sup> , 2 <sup>nd</sup> , 3 <sup>rd</sup> , 4 <sup>th</sup> )	

#### 2 UNIVERSITY STUDIES

What subjects do you study at your university?

#### 3 ENGLISH LANGUAGE LEARNING

(Give as much detail as possible)

a. How long have you been learning English?

#### b. When do you use English?

English Language Learning continued:				
c.	When do you need English?			
d.	What is difficult for you in English?			
e.	How do you plan to use English in the future?			
f.	What are your objectives for English Language learning whilst you are in Oxford? Are there any particular topics you are interested in?			
Hertford College Application Form 2025				

4	LEVEL	OF EN	GLISH
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Please give your own assessment of your ability in the following. Use the key below and write a number in each box:

Vocabulary	Grammar	Listening	Speaking	Reading	Writing
		1	1		

Key:

1 = Very Low 2 = Basic 4 = Good5 = Very Good6 = Excellent

3 = Average 6

5 LEISURE INTERESTS AND HOBBIES

#### 6 PERSONAL STATEMENT

In no more than 500 words, please give us further information about you and your reasons for applying for this course at Oxford. Please mention any relevant study or travel experience which you feel would benefit your application.

Are there any particular interests you would like to pursue while you are in Oxford?

#### 7 STUDENT MEDICAL FORM

We need the following information to ensure you have the best possible care during your stay.

• Do you suffer from any illnesses?

• Do you take medication? If yes, which medication?

• Do you have any allergies? (Food, animals, medication?)

- Do you need a special diet?
- Have you travelled outside of your home country before (where, when and for how long)?

Is there anything else you think we ought to know about your health?

#### 8 DISCLAIMER AND SIGNATURE

By signing, I accept I will be taking out travel insurance and have applied for the correct visa. I will also comply with the Acceptance and Enrolment terms and contract outlined below.				
Parent or guardian signature:		Date:		
Print name:				
In case of emergency, please contact:				
Emergency contact address:				
Student Signature:	Print name:	Date:		

