

**NORWICH UNIVERSITY COLLEGE OF THE ARTS**  
PRINCIPAL: PROFESSOR JOHN LAST

**Applicants should send this form to their referee**

**CONFIDENTIAL REFERENCE in connection with Application to MA Moving Image and Sound**

The following applicant to the MA Moving Image and Sound course at Norwich University College of the Arts has given your name as referee. Would you please send the following confidential report to Academic Registry, Norwich University College of the Arts, Francis House, 3-7 Redwell Street, Norwich, Norfolk NR2 4SN.

**Reference for:** (Name of applicant)

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Address of Applicant:

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Name of Referee:

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Address of Referee:

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Tel No:

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Title/position/occupation/s:

Name of establishment or organisation (if applicable):

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Signature:

Date:

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Please indicate how long and in what capacity you have known the applicant, give your candid opinion of the applicant and their suitability to undertake the proposed course of study. Please attach additional sheet if necessary.

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**NORWICH UNIVERSITY COLLEGE OF THE ARTS**  
PRINCIPAL: PROFESSOR JOHN LAST  
**MA Moving Image and Sound**

**THIS FORM IS AVAILABLE IN ALTERNATIVE FORMATS.  
PLEASE CONTACT ACADEMIC REGISTRY.**

**APPLICATION TO MA MOVING IMAGE AND SOUND**

**Full-time**

**Part-time (delete as appropriate)**

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Please return the application form with a cheque for £10 payable to Norwich University College of the Arts to: *Academic Registry, Norwich University College of the Arts, Francis House, 3-7 Redwell Street, Norwich, Norfolk, NR2 4SN*. Applications are taken throughout the academic year but will need to be received by **22 January 2010** for AHRC applications or **20 August 2010** for application to begin the course in October 2010. Applications after **20 August 2010** will be considered, provided there is availability on the course.

*Please pass the enclosed sheet to your referee as soon as possible. Invitation to interview and/or an offer of a place on the course may be delayed if your reference is not received.*

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First Name/s:

Surname:

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Correspondence or term-time address:

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Country of birth:

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Sex: Male/Female (please delete one)

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Postcode:

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Nationality:

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Term-time telephone no:

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e-mail:

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Home address (if different from above):

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Please state your Local Education Authority:

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Postcode:

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Home telephone number if different from above:

**Declaration**

I understand that by signing this form I certify that the information I have provided is complete and accurate:

Signature:

Date:

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How did you hear about the MA Moving Image and Sound course at Norwich?

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PLEASE INDICATE WHETHER YOU HAVE ANY **CRIMINAL CONVICTIONS** WITH THE EXCEPTION OF:

A MOTORING OFFENCE FOR WHICH YOU RECEIVED A FINE OR THREE PENALTY POINTS; OR  
A SPENT SENTENCE (AS DEFINED BY THE REHABILITATION OF OFFENDERS ACT 1974)

THIS WILL HELP US CARE FOR OUR STUDENTS.

**YES**

**NO**

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**To help the School monitor its Equal Opportunities Policy and to comply with the requirements of the Department for Education and Skills, you are invited to circle the number that most adequately describes your ethnic group.**

- |                                       |   |
|---------------------------------------|---|
| 11 White British                      | 33 Asian or Asian British - Bangladeshi |
| 12 White Irish                        | 34 Chinese                              |
| 19 Other White Background             | 39 Other Asian Background               |
| 21 Black or Black British – Caribbean | 41 White & Black Caribbean              |
| 22 Black or Black British – African   | 42 White & Black African                |
| 29 Other Black Background             | 43 White & Asian                        |
| 31 Asian or Asian British – Indian    | 49 Other Mixed Background               |
| 32 Asian or Asian British – Pakistani | 80 Other Ethnic Background              |
|                                       | 98 Decline to Answer                    |
- 

Who do you expect to be responsible for paying your fees? (Please circle appropriate response)

UK award

LEA award

Parent or Guardian

Yourself

Other

If other, please give name and address of fund or sponsor:

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Do you have a disability that requires specific support or access arrangements?

Yes

No

If so, please tell us what they are:

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Current occupation/s:

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If currently a student, give college/university name:

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Title of current course of study:

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Have you previously applied to an MA course at Norwich?

Yes

No

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**REFEREE:** Please give name of referee who is supplying your reference:

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Address:

Name of establishment/organisation (if appropriate):

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Title/position/occupation/s:

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Tel No:

Email:

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**PROFESSIONAL ACTIVITIES / CURRICULUM VITAE**

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Please list (briefly) your professional activities, including relevant work experience, exhibitions, grants, scholarships, bursaries, prizes, sales, commissions and publications, and catalogues mentioning your work, as appropriate. Please give dates and continue on a separate sheet, if necessary.

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**APPLICANT'S STATEMENT:**

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Please state briefly below why you are applying to the MA Moving Image and Sound at Norwich University College of the Arts. Please attach additional sheet if necessary.

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Please give a brief statement on your current work.

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Please state briefly any experience, skills or interests not previously mentioned that you consider relevant to this application

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