

## **Disrupted Studies Form**

At the University of Liverpool we are committed to supporting students' progress onto university that have faced difficulties and problems throughout their education. If you are considering progressing into university and your studies been disrupted in a way that was beyond your control please use this form to tell us about the issues you have faced.

This form can be used to notify the University of issues of a personal, social or domestic nature that have affected your education. Please complete the form and inform us of the relevant information about the issues you have faced throughout your education. The university will then contact you to discuss how we support you to progress into the university.

We are keen to hear from students who; have spent time in Local Authority Care, have caring responsibilities for parents/siblings, are estranged from family, forced migrants, have suffered medical issues that have impacted on their studies or any other disruptions to their education.

All information that you share will be kept strictly confidential and only shared with the relevant departments.

Further guidance is available at <insert weblink to webpage detailing info on disrupted studies>

### PART 1: To be completed by the applicant

#### Personal information

| Title  |             | Forei | name/Given nam | ne(s) |  |  |
|--|-------------|-------|----------------|-------|--|--|
| Surnar   | me/Family n | ame   |                |       |  |  |
| Telephone number                                   |             |       | Email address  |       |  |  |
| UCAS ID/Liverpool applicant number (if applicable) |             |       |                |       |  |  |

#### **Course information**

Please list the course, or courses which, you are interested in studying at university

| Course/s title |  |  |  |
|----------------|--|--|--|
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# Applicant statement

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# PART 2: To be completed by a teacher or appropriate third party

## Referee information

| Name of referee        |  |      |           | Position |   |                 |  |
|------------------------|--|------|-----------|----------|---|-----------------|--|
| Name of school/college |  |      |           |          | U | CAS school code |  |
| Telephone number       |  | Emai | l address |          |   |                 |  |

### Referee statement

| ormation about the dates/times when the circumstances occurred, the applicant's academic jectory and any barriers they have faced to their education. |  |  |  |  |  |  |
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## **PART 3: Declarations**

### **REFEREE DECLARATION**

I confirm that the information provided on this form is a complete and accurate record and that no material information has been willingly omitted. I give my consent to the processing of this information by the University of Liverpool.

| Signed  |
|---|
| Date  |
| APPLICANT DECLARATION   |
| I confirm that the information I have provided is a complete and accurate record and that no material information has been willingly omitted. I give my consent to the processing of my data b the University of Liverpool. |
| Signed  |
| Date  |

Please submit the completed form and any supporting evidence by email to <insert relevant email address> or on paper to: <insert relevant postal address>