| [**Access**](http://www.leeds.ac.uk/info/128005/applying/33/alternative_admissions/2) **to Leeds** | **W:** www.leeds.ac.uk/A2L |
| --- | --- |
|  | **E:** accesstoleeds@leeds.ac.uk |

**Access to Leeds 2024 Application Form**

**Access to Leeds 2024 Application Form**

**PLEASE READ**: Sections 1-3 should be completed by the applicant. Sections 4-6 should be completed by a referee from the applicant’s school/college.For further guidance on completing this form, please Ctrl+Click [here](http://www.leeds.ac.uk/accesstoleedsguidelines).

After completion, please save the form with your surname, UCAS ID as the file name. Ctrl+Click [here](https://uola2lportal.powerappsportals.com/) and follow the instructions to submit your application.

**Deadlines for submitting applications: 1st November 2023 for Medicine (A100) and Dental Surgery (A200) and 14th February 2024 for all other courses.**

**Privacy and Data Protection: By completing this application, you are agreeing to your personal data being processed by the University of Leeds as detailed in our** [**Privacy Statement.**](https://www.leeds.ac.uk/undergraduate-applying/doc/access-leeds-direct-application-privacy-notice)

| 1. **Applicant personal details** – the applicant ***must*** complete all parts of this section | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **UCAS personal ID:** |  | | | |  | | | | |
| **First name:** |  | | | | **Surname:** | |  | | |
| **Preferred name:** |  | | | | **Date of birth:** | |  | | |
| **Address:** |  | | | | | | | **Postcode:** |  |
| **Personal email:** |  | | | | | | | | |
| **Name of the school/college where I completed my GCSEs (or equivalent):** | | |  | | | | | | |
| **I have been a part of:** | | Reach for Excellence **\*** | | Realising Opportunities**\*** | | Pathways to Law **\*** | | | |
| *(Tick only if applicable)* | | Access to Leeds (previous application) **\*\***  Access to Leeds (previous module pass) **\*\***  ***\**** *Please do not complete this form and instead contact accesstoleeds@leeds.ac.uk.*  ***\*\**** *If you have been assessed as eligible in a previous cycle, please only complete sections 1-3 of this form. We do not require a referee for re-applicants.* | | | | | | | |

| 1. **Course details** – the applicant ***must*** complete this section   Please note that Access to Leeds can only be applied to standard courses and not to Foundation Year courses. | |
| --- | --- |
| **I have applied to these courses at the University of Leeds:** | |
| **Course code** | **Course name** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

| 1. **Applicant statement** – the applicant ***must*** complete this section | | | |
| --- | --- | --- | --- |
| **Which Access to Leeds criteria do you think you meet and why? Please note that you must specify at least two separate criteria to be considered for eligibility.** | | | |
|  | | | |
| I confirm that the information provided on this form is true, complete and accurate and no information requested has been omitted.  I give my consent to the processing of my data by the University of Leeds. **Please type your name in the signature box to confirm.** | | | |
| **Applicant’s Signature:** |  | **Date:** |  |

| 1. **Referee personal details** –this section ***must*** be completed by a tutor or teacher | | | | |
| --- | --- | --- | --- | --- |
| **Name:** |  | | **Job title:** |  |
| **School/college:** | |  | | |
| **Email:** |  | | | |

| 1. **Eligibility** –this section ***must*** be completed by a tutor or teacher |
| --- |
| **Please indicate, to the best of your knowledge, which eligibility criteria the applicant meets:**  **Please note that at least two separate criteria out of the six available must be identified for eligibility to be considered.** |
| 1. The applicant’s parents / carers did not go to university. |
| 1. The applicant is from a household with gross annual income of £25,000 or below. This is demonstrated in **one** of the following ways: |
| in receipt of 16-19 Bursary Fund with income threshold of £25,000 or below **OR** |
| was / is eligible for free school meals during their GCSEs or later **OR** |
| applicant will provide a Declaration of Household Income form or other proof of household income. |
| 1. The applicant attended a school which achieved below the national average Attainment 8 score at GCSE. |
| 1. The applicant lives in an area with low levels of participation in higher education. |
| 1. The applicant is care experienced (this may include public or kinship care). |
| 1. The applicant’s studies have been disrupted due to personal circumstances. Please tick any applicable and provide a brief description in the space provided. |
| Caring responsibilities. |
| Experienced a recent close family bereavement. |
| Living independently from their parents/carers. |
| Studies impacted by a mental or physical health condition. |
| Other circumstances. |
| **Brief description of the nature, timescale and impact of the disruption on the student’s studies:** |
|  |

| 1. **Referee section – Any other information -** this section to be completed by a tutor or teacher | | | |
| --- | --- | --- | --- |
| **If you wish to, please provide any further information you think may be relevant to the student’s application.** | | | |
|  | | | |
| The information given on this form is complete and accurate, to the best of my knowledge and belief, and gives a true description of the applicant’s personal circumstances. I agree that the University of Leeds may make any reasonable enquiries in connection with this application. Please type your name in the signature box to confirm. | | | |
| **Referee’s Signature:** |  | **Date:** |  |

**Any queries regarding the Access to Leeds application form, or the scheme in general, should be directed to us via email at** [**accesstoleeds@leeds.ac.uk**](mailto:accesstoleeds@leeds.ac.uk)

**To submit the application form, Ctrl+Click** [here](https://uola2lportal.powerappsportals.com/) **and follow the instructions.**