

This form is to be completed before purchasing a Passport to Learning
Please return to kcu@kent.gov.uk or via post to Room 2.61, Sessions House, Maidstone, Kent,
ME14, 1XQ

PASSPORT APPLICANT'S PERSONAL DETAILS (BLOCK CAPITALS PLEASE)

Name of young person (recipient)		Date of Birth		Male	Fem
Passport to Learning number	FOR OFFICE USE				
Home address					
Postcode					

Name of School attended		Year	
-------------------------	--	------	--

OR

EHE	<i>Please tick</i>	<u>Your data will not be used outside KCU</u>
-----	--------------------	---

PARENT/CARER DETAILS (BLOCK CAPITALS PLEASE)

Contact details for Parent/carer	Name:	
	Relationship to young person:	
	Home telephone no:	
	Mobile no:	
	Email:	

Each month Kent Children's University produces a monthly eNewsletter for Parents/Carers.
If you AGREE for your email address to be added to the eNewsletter database please tick:



All information will be handled in a secure and confidential manner and held in accordance with
the 1998 Data Protection Act.