

Dear

Re: BSc (Hons) Advanced Nurse Practitioner Degree Course

Thank you for your interest in the above course and we have pleasure in enclosing an application pack containing an application form, a Clinical Site Evaluation form, Reference forms and Authorisation for the Payment of Fees form.

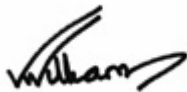
You will note that if the place on the course is being funded directly by the NHS Trust/employer or through funds allocated by NHS London as part of the contract or under another educational scheme, the appropriate named Signatory for the Trust (not your ward manager) must sign the **Authorisation for the Payment of Tuition Fees** form. If you are self funding you will need to tick the appropriate box on this form to confirm that you will be paying your own fees. Applications without the funding details will delay the processing, including access to the University's learning resources. It is important that you keep a copy of the completed application form before sending it to your Trust signatory.

If you are self funding, there may be the possibility of making payments in instalments, please discuss this with the Course Administrator on the number below.

All these forms should be completed and returned to us before your application can be processed. Please also ensure that the entry requirements are met prior to returning the forms.

If we can be of any further help, please do not hesitate to contact the Course Administrator on 01494 522 141 ext 5776. You may also find the following website useful www.bucks.ac.uk/cpd

Yours sincerely



Vicki Williams

Marketing and Recruitment Officer

Enclosure List:: Application form and Guidance notes
A clinical site evaluation form
Authorisation for the Payment of Fees Form
Reference forms
Course Information