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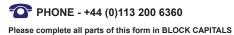




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Date of birth / /	Have you previously studied with Kaplan Financial? Yes/	/No		
Address for correspondence	If yes, please provide your Kaplan reference:			
·	Additional Learning Support (Please circle your answer)			
	Do you consider yourself to have a learning difficulty.			
Postcode Home Phone	disability or health problem? Yes/	/No		
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Please provide an email address you have access to during and outside office hours. All communications,	course. All information will be treated as strictly private and confidential.			
including those relating to your MyKaplan online resources, will be sent to this email address.	Please select the option which best describes your ethnic origin: White British White Irish White other Black British Black African			
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☐ I'll be claiming my fees in FULL through company expenses	☐ I'm NOT claiming my fees through company expenses					
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