

For advice on completing this form or about your course, please contact our Student Services team

+44 (0)161 259 7400
Please complete all parts of this form in BLOCK CAPITALS
1 Your details

Mr/Mrs/Ms/Miss Surname _____ Have you previously studied with Kaplan Financial? Yes/No
 Forename(s) _____ If yes, please provide your Kaplan reference: _____
 Date of birth / / Address for correspondence _____ If no, where did you previously study? _____
 _____ Why did you decide to study with Kaplan Financial? _____
 _____ Postcode _____ Additional learning support *(Please circle your answer)*
 Country _____ Home phone _____ Do you consider yourself to have a learning difficulty, disability or health problem? Yes/No
 Mobile _____ Work phone _____ If yes, do you require any additional support? Yes/No
 Please provide an email address you have access to during and outside office hours. Please provide sufficient details to enable us to give you the required level of support during your course. All information will be treated as strictly private and confidential.
 All communications, including those relating to your MyKaplan online resources, will be sent to this email address.
 Email address _____ Please select the option which best describes your ethnic origin:
 ICAEW (ACA) registration number _____

White British <input type="checkbox"/>	White Irish <input type="checkbox"/>	White other <input type="checkbox"/>	Black British <input type="checkbox"/>	Black African <input type="checkbox"/>
Black Caribbean <input type="checkbox"/>	Black other <input type="checkbox"/>	Asian British <input type="checkbox"/>	Asian Indian <input type="checkbox"/>	Asian Pakistani <input type="checkbox"/>
Asian Bangladeshi <input type="checkbox"/>	Chinese <input type="checkbox"/>	Asian other <input type="checkbox"/>	Mixed African <input type="checkbox"/>	Mixed Caribbean <input type="checkbox"/>
Mixed Asian <input type="checkbox"/>	Mixed other <input type="checkbox"/>	Other origin <input type="checkbox"/>	Unknown <input type="checkbox"/>	Undisclosed <input type="checkbox"/>

Note: It is your responsibility to complete the ICAEW (ACA) registration formalities and enter the ICAEW (ACA) examinations.

2 Your employer's details

Company name _____ Training manager's name Mr/Mrs/Ms/Miss
 Company registration number _____
 Work address _____ Training manager's telephone number _____
 _____ Postcode _____ Training manager's email address _____

3a Manual payment option 1 – Your employer is sponsoring you

If you wish to submit a manual enrolment form and the employer is responsible for the payment of fees, please complete the following:
As employer of the student for whom this form is completed, we are responsible for payment of amounts due to Kaplan Financial on receipt of invoices, unless credit facilities with Kaplan Financial have been granted in respect of the student and undertake to inform you in writing promptly of any change to this arrangement. We understand that we are fully responsible for the payment of amounts due to Kaplan Financial in all circumstances (including termination of employment or course cancellation). We confirm that we have read, understood and accept the terms and conditions and Policies (as defined below) detailed on www.kaplan.co.uk

Employer's signature _____ Invoice address *(if different to the employer address shown)* _____
 Name _____ Contact name _____
 Do you require Kaplan to quote a purchase order number on the invoice: **Yes / No** Address _____
 If yes, please provide purchase order number: _____
 Kaplan customer number *(if known)*

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 Postcode _____

3b Manual Payment Option 2 - Cheque / Card

Please tick which of the options apply
 I enclose a cheque for £ _____ made payable to Kaplan Financial Limited.
 I wish to pay by Credit/Debit card. Please note we are unable to accept card details on this form due to data protection. We will call you once we have received your form to take payment.

Contact number:

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 For any enquiries regarding your booking, please telephone **0161 259 7400**.

4 Your study materials (Address required if you're enrolling on a Knowledge Online, Knowledge Live Online, Flexible Online or OnDemand course. A signature will be required upon delivery)

Please deliver to:

- My home address My employer's address
 Or an alternative delivery address (if applicable include address in space opposite)

Address: _____

Postcode: _____

5a Your course selection: Certificate Level (Please check dates, times, course offerings and fees on [Kaplan website](#) before completing this table)

Examples

Subjects	Classroom Course Start Date	Live Online Course Start Date	Flexible Learning / OnDemand	CBE Date	Exempt from subject	Price (inc. VAT)
<ul style="list-style-type: none"> • Accounting • Assurance • Law 	01/09/21	03/09/21	✓	02/05/21		£xxx
			<input type="checkbox"/>			
			<input type="checkbox"/>			
			<input type="checkbox"/>			

5b Your course selection: Professional /Advanced (Please check dates, times, course offerings and fees on [Kaplan website](#) before completing this table)

Examples

Level	Subjects	Sitting	Centre Location	Knowledge			Application		Exam Prep			Resit Is this a resit?	Recorded Online Recordings only - yes/no (for BPB/BPI)	Price (inc. VAT)
				Classroom Course Start Date	Live Online Course Start Date	Flexible Online Learning	Classroom Course Start Date	Live Online Course Start Date	Classroom Course Start Date	Live Online Course Start Date	OnDemand			
Professional / Advanced	<ul style="list-style-type: none"> • Financial Reporting & Accounting • Audit & Assurance • Tax Compliance • Business Strategy 	01/09/21	Birmingham	09/01/21	09/03/21	✓	10/01/21	10/03/21	01/11/21	11/03/21	✓	No	No	£xxx
						<input type="checkbox"/>					<input type="checkbox"/>			£
						<input type="checkbox"/>					<input type="checkbox"/>			£
						<input type="checkbox"/>					<input type="checkbox"/>			£
						<input type="checkbox"/>					<input type="checkbox"/>			£
						<input type="checkbox"/>					<input type="checkbox"/>			£

Total Course Fees

£

UK = £7.20 per subject
 Isle of Man (IOM) = £30 per subject
 EU = £35 for the first subject then £30 for any subsequent subjects
 Rest of the world = £50 per subject

6 Your signature

1. What is your nationality: _____

2. Do you depend on a visa to reside in the UK Yes / No

I confirm that I have read, understood and accept the terms & conditions and privacy policy detailed on www.kaplan.co.uk

Date: _____

Student signature: _____

All materials are provided by Kaplan Publishing Limited, included in our course fees and made available to you on the first day of your course. Kaplan Financial acts as agent in collecting such amounts. Where applicable you will receive online access to MyKaplan Resources, Tests and Performance Monitoring via www.mykaplan.co.uk

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Fees include VAT where applicable. Please note that exam fees are not included in your course fees.

Registered office: 179-191 Borough High Street, London SE1 1HR. Registered in England no. 1028790

To submit your enrolment form, please email:
aca@kaplan.co.uk

Alternatively you can book by phone on:
0161 259 7400 (UK customers, card payments only)