



Southampton Solent University

INVENTORS ACADEMY COURSE ACKNOWLEDGEMENT FORM
(Please complete in BLOCK CAPITALS and Black pen)
CURRENT ACADEMIC YEAR

1. Personal details

Student Number (If applicable):

Student Name:

Date of Birth:

Address:

.....

.....

Post Code: E-mail:

Home Telephone No: Mobile phone number:

2. Please complete this form if you wish to be enrolled/re-enrolled in the Inventors Academy associated with Southampton Solent University for the current academic year. Once returned, then a new Campus Card * will be issued to you.

Return to :

Southampton Solent University
Community & Enterprise Office
F.A.O. Rebecca Carr
East Park Terrace
Southampton
SO14 0YN

* New membership - please enclose a passport sized photograph with your application.

Signature: Date:
