

Termin:	02. November 2017	Uhrzeit und Anschrift des Prüfungsortes werden in der Einladung bekannt gegeben, die Sie etwa 2 Wochen vor dem Termin von uns erhalten.
Ort:	Kiel	
Gebühr:	€ 60,00	
Anmeldeschluss beim Landesverband der VHSn:*	01. Oktober 2017 (bis zum 13.10.2017 nur mit € 40,00 Nachmeldegebühr)	Ab diesem Zeitpunkt können freie Plätze nicht mehr garantiert werden.
Bankverbindung:	Kto.-Inh.: Landesverb. der VHSn SHs e.V. Förde Sparkasse Kiel IBAN: DE86 2105 0170 0092 0520 00, BIC: NOLADE21KIE	Bitte geben Sie als Verwendungszweck Ihren Namen und den Namen der Prüfung an.
Zahlungseingang bis:	01. Oktober 2017	Bitte fügen Sie Ihrer Anmeldung einen Nachweis über die Zahlung der Prüfungsgebühr bei.
Anmeldung bei:	Landesverband der Volkshochschulen Schleswig-Holsteins e.V., Holstenbrücke 7, 24103 Kiel Fax: 0049(0)431-96685 Mail: hu@vhs-sh.de / cb@vhs-sh.de	Anmeldungen per Fax oder Mail sind möglich, sofern die Formulare original unterschrieben wurden.
Ansprechpartner:	Sina Hubrig Christina Bruhn	0049(0)431-97984-17 0049(0)431-97984-19

*Anmeldeschluss in Cambridge ist der 01. Oktober 2017 (danach nur mit € 40,00 Nachmeldegebühr). Für die Organisation und um sicherzustellen, dass wir Ihre Anmeldung fristgerecht nach Cambridge weiterleiten können, benötigen wir Ihre Anmeldung vor dem Anmeldeschluss in Cambridge, zu dem o.a. Termin.

PAT registration form

This form is designed as an aid for centres making entries via the Admissions Testing Service Entries Extranet. **It will NOT be accepted as an entry by the Admissions Testing Service.**

Please refer to the [Instructions for completing the registration form](#) that accompany this form.

1. CENTRE DETAILS

Centre name:	Landesverband der Volkshochschulen Schleswig-Holsteins e.V.	Centre number:	D	E	0	5	5
Address:	Holstenbrücke 7 D-24103 Kiel Deutschland	Telephone number: (including country code)	0049 (0)431-97984-17				
		Fax number: (including country code)	0049 (0) 431-96685				
Contact name:	Christina Bruhn – Sina Hubrig	Email address:	cb@vhs-sh.de – hu@vhs-sh.de				

2. CANDIDATE DETAILS

Family name:						First name(s):							
Gender:	Male <input type="checkbox"/>	Female <input type="checkbox"/>				Date of birth: (dd/mm/yyyy)			/		/		
Candidate's address:						Candidate's email:							
						Telephone number:							
PAT		Course code				College code			College name				
Physics (3 years)	<input type="checkbox"/>	F	3	0	0								
Physics (4 years)	<input type="checkbox"/>	F	3	0	3								
Physics and Philosophy (4 years)	<input type="checkbox"/>	V	F	5	3								
Engineering (4 years)	<input type="checkbox"/>	H	1	0	0								
Civil Engineering (4 years)	<input type="checkbox"/>	H	2	0	0								
Mechanical Engineering (4 years)	<input type="checkbox"/>	H	3	0	0								

Electrical Engineering (4 years)	<input type="checkbox"/>	H	6	2	0		
Information Engineering (4 years)	<input type="checkbox"/>	H	6	3	0		
Chemical Engineering (4 years)	<input type="checkbox"/>	H	8	0	0		
Biomedical Engineering	<input type="checkbox"/>	H	8	1	1		
Engineering, Economics and Management (4 years)	<input type="checkbox"/>	H	L	N	0		
Materials Science	<input type="checkbox"/>	F	J	2	2		
Materials, Economics and Management (MEM)	<input type="checkbox"/>	F	L	N	0		

3. ACCESS ARRANGEMENTS

Not applicable	<input type="checkbox"/>	Modified enlarged A4 question paper	<input type="checkbox"/>	Use of laptop	<input type="checkbox"/>
Maximum of 25% extra time	<input type="checkbox"/>	Reader	<input type="checkbox"/>	Other (please state in box below)	<input type="checkbox"/>
Braille question papers	<input type="checkbox"/>	Scribe	<input type="checkbox"/>		
Supervised rest breaks	<input type="checkbox"/>	Unmodified A3 question paper and answer sheet	<input type="checkbox"/>		
Reason for Access Arrangement request (evidence, statement from school/doctor)					

4. CANDIDATE'S SIGNATURE

<p>THE ADMISSIONS TESTING SERVICE TERMS</p> <p>Please note that by registering for the Physics Aptitude Test (PAT) you are agreeing that data provided as part of the entry process may be passed to the Admissions Testing Service and the University of Oxford, and that data may be used for research purposes in connection with admissions procedures. You also agree that if you obtain a place for a course where your PAT result was used in the admissions process, then the University of Oxford and UCAS may supply the Admissions Testing Service with data about your results in subsequent examinations whilst you are studying at the University of Oxford, unless you specifically notify the University of Oxford in writing. The Admissions Testing Service will take reasonable care to keep candidates' personal details anonymous.</p>	
<p>CENTRE'S TERMS*</p>	
SIGNATURE _____	DATE _____

*Centres should update this part of the form to suit their centre's local terms.



**PLEASE RETURN THIS FORM TO YOUR CENTRE.
THIS REGISTRATION FORM SHOULD NOT BE RETURNED TO THE ADMISSIONS TESTING SERVICE.
ALL ENTRIES FOR PAT MUST BE MADE BY REGISTERED CENTRES VIA THE ADMISSIONS TESTING
SERVICE ENTRIES EXTRANET.**

Instructions for completing the registration form

Candidate details

Please give your name, gender, date of birth **exactly** as provided to the universities or UCAS.

Please give the Oxford College name from the following list:

<i>Open application</i>	<i>OPEN</i>	Mansfield	MAN	Somerville	SOM
Balliol	BAL	Merton	MER	Trinity	TRI
Brasenose	BNC	New College	NEW	University	UNI
Christ Church	CCH	Oriel	ORL	Wadham	WAS
Corpus Christi	CCC	Pembroke	PBK	Worcester	WOR
Exeter	EXT	Queen's	QNS	Permanent Private Halls	
Harris Manchester	HMC	St Anne's	STA	Blackfriars	BKF
Hertford	HTF	St Catherine's	STC	Campion Hall (M)	CAM
Jesus	JES	St Edmund Hall	SHE	Greyfriars	DRY
Keble	KBL	St Hilda's	SHI	Regent's Park	RPK
Lady Margaret Hall	LMH	St Hugh's	SHU	St Benet's Hall (M)	STB
Lincoln	LIN	St John's	STJ	St Stephen's House	SSH
Magdalen	MAG	St Peter's	STP	Wycliffe Hall	WYC

Please consult the University of Oxford prospectus for 2017 entry to ensure that your chosen College is accepting applications for your chosen course.

Access arrangements

If you are normally allowed access arrangements such as extra time or enlarged papers to take public examinations, please note this on your registration form. Please see below for a list of access arrangements available. If your access arrangement is not listed please provide more detail of it on the registration form. It is your responsibility to make your centre aware of any access arrangements you may need.

- Maximum of 25% extra time
- Braille question papers
- Unmodified A3 question paper and answer sheet
- Modified enlarged A4 question paper
- Reader
- Scribe
- Supervised rest breaks
- Use of laptop for Section 3
- Other

Requests for modified question papers (Braille, enlarged paper etc.) must be received by **16 September 2017**.

Further information relating to the PAT can be found at www.patoxford.org.uk