



University of
BRISTOL

BADOCK HALL

Stoke Park Road
BRISTOL BS9 1JQ

**PERSONAL
INFORMATION
2011 - 2012**

We need to receive the following information at least 2 weeks prior to your arrival.

PLEASE COMPLETE ALL SECTIONS - INDICATING N/A IF A SECTION IS NOT APPLICABLE

Surname of Student:		(PLEASE PRINT)	
Given Name:			
Hall to complete:		Room Number	UoB Student ID No:
EMERGENCY INFORMATION			
Name of Next of Kin:			
Contact Address for Next of Kin:			
Next of kin email:		Post Code:	
Next of kin contact telephone/mobile:			
Possible Activities you may take up in Hall: Please give details WHERE APPROPRIATE			
SPORT IN HALL		Height: (ONLY if over 193cms) _____ cms	
1. _____		POSITION: _____	
2. _____		POSITION: _____	
MUSIC	Instrument/s: 1. _____ 2. _____	Grade/s: 1. _____ 2. _____	
DRAMA	Acting: _____	Technical: _____	
JCR COMMITTEE		Post: _____	
DJ			
CHOIR			
DEBATING			
CHARITY			
BALL ORG.			
ART			
BAR WORK	State Experience: _____		
MEDICAL INFORMATION please indicate below if you are undergoing any long term medical treatment			
VERY IMPORTANT PLEASE DECLARE KNOWN MEDICAL CONDITIONS:			
VERY IMPORTANT – ADVISE IF YOU NEED CARRY AN EPIPEN DETAIL MEDICATION TAKEN REGULARLY AND DOSAGE : Including inhaler type			
SERIOUS ALLERGIES (INCLUDING DIETARY)			
SUPPLY OF COLD MEDICATION STORAGE (medical note required)			
HEARING IMPAIRMENT	Level: _____		
SIGHT IMPAIRMENT	Level: _____		
MOBILITY IMPAIRMENT	Level: _____		
SPECIAL DIET REQUIRED	Please specify: _____		

EITHER EMAIL COMPLETED FORM TO badock-hall@bristol.ac.uk

Mailing address in email not available:

**Mrs K Strong
Student Support Administrator
Hall Office
Badock Hall
Stoke Park Road
BRISTOL BS9 1JQ**