



Oxford Numerology University®

STUDENT INTAKE FORM

This form is required for all new students upon enrollment. It helps us understand your educational background, personal needs, and training goals to ensure the highest quality learning experience.

SECTION 1 – PERSONAL INFORMATION

Full Name: _____

Date of Birth (DD/MM/YYYY): _____

Gender (optional): _____

Email Address: _____

Phone Number (incl. country code): _____

City & Country of Residence: _____

Preferred Language of Communication: _____

SECTION 2 – EMERGENCY CONTACT

Full Name: _____



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Relationship to You: _____

Phone Number: _____

Email (optional): _____

SECTION 3 – HEALTH AND LEARNING CONSIDERATIONS

Do you have any medical conditions we should be aware of (e.g., chronic illness, mobility limitations)?

☐ No ☐ Yes – Please specify: _____

Do you have any learning difficulties or special educational needs?

☐ No ☐ Yes – Please specify: _____

Do you have any personal circumstances or restrictions that may affect your learning process or participation?

☐ No ☐ Yes – Please provide brief details: _____

SECTION 4 – EDUCATIONAL BACKGROUND & EXPERIENCE

Highest level of formal education completed:

- ☐ High School ☐ Bachelor's Degree
☐ Master's Degree ☐ Doctoral Degree
☐ Other: _____



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Have you taken any previous training in numerology?

☐ No ☐ Yes – Please specify course title(s), teachers, dates:

Do you hold any qualifications in coaching, psychology, education, or related fields?

☐ No ☐ Yes – Please specify: _____

SECTION 5 – TRAINING MOTIVATION

What motivated you to enrol in this course?

What are your personal or professional goals for this training?

SECTION 6 – CONSENT AND DECLARATION

By signing below, I declare that the information provided in this form is true and accurate to the best of my knowledge. I understand that all personal data will be handled confidentially, under the General Data Protection Regulation (GDPR) and the internal policies of Oxford Numerology University.

I consent to being contacted by email or phone regarding course participation, updates, and certification.

Student's Signature: _____

Date: _____