

# ALLEN COLLEGE OF HOMOEOPATHY



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## SUMMER SCHOOL APPLICATION FORM

<b>Name:</b>	
<b>Address:</b>	
	<b>Post code:</b>
<b>Tel/Fax no.:</b>	
<b>E.Mail address:</b>	
<b>Web site (if applicable):</b>	
<b>Present occupation:</b>	
<b>Homoeopathic experience:</b>	
<b>Please detail any special needs or disabilities which may need consideration:</b>	

*The Allen College has an Equal Opportunities Policy. All details given are in confidence to the admissions staff.*