



# Swanlea Sixth Form Application



For Office Use Only

Student Ref

Fill with a blue or black pen

## PERSONAL DETAILS

Surname: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Postcode: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Sex:  Male  Female

Date Of Birth: DD / MM / YYYY

Age on 31st August 2017: \_\_\_\_\_ years old

Previous School/College: \_\_\_\_\_

Date From: DD / MM / YYYY

To: DD / MM / YYYY

Born in UK:  Yes  No

If 'No', how long have you live in the UK? \_\_\_\_\_ Years \_\_\_\_\_ Month

## PARENTAL CONTACT DETAILS

	Father/Carer	Mother/Carer
Title (Mr/Mrs/Dr...):	_____	_____
Surname:	_____	_____
Home Phone:	_____	_____
Mobile Phone:	_____	_____
Email Address:	_____	_____
Home Address:	_____ _____ _____	_____ _____ _____
Occupation:	_____	_____
Work Address:	_____ _____ _____	_____ _____ _____
Work Phone:	_____	_____

## DOCTOR'S DETAILS

Doctor's Name: \_\_\_\_\_

Doctor's Phone: \_\_\_\_\_

Doctor's Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Medical Requirements

Glasses  Eczema  Asthma

Allergies (provide details) \_\_\_\_\_

Other \_\_\_\_\_







# PLEASE ASK YOUR TEACHER TO COMPLETE THIS SECTION

The purpose of this reference form is to help us in our guidance procedures. It is an open reference and will be used with students at interview to review their current performance and at enrollment to guide their final choices.

**Student Name:** .....

IT IS ESSENTIAL THAT THIS REFERENCE IS COMPLETED  
BEFORE THE APPLICATION IS SENT TO SWANLEA.

## PERSONAL DETAILS

Current Performance	1	2	3		1	2	3
Attendance (See % below)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Punctuality (See % below)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Relationship with staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attitude to study	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Relationship with students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to meet deadlines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Ability to work independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**1 = Poor (Below 95%)    2 = Good (95% - 96%)    3 = Excellent (97%+)**

Are there any extenuating circumstances to explain any poor performance above?

---



---

Examinations student has already taken or to be taken with predicted grade or grade obtained

Examination (Full Subject Name)	Grade	Examination (Full Subject Name)	Grade
<i>eg. English Language</i>			

Please comment on the student's suitability for the course he/she has applied for.

---



---

Any other comments on the student's performance?

---



---

Does the student require additional language or learning support or have a statement of special needs?  
If so, please give details.

---



---

**Name:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**School:** \_\_\_\_\_

School/College stamp here

**Date:** DD / MM / YYYY