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|  | Ormiston Victory AcademySixth Form Application Form |

**Courses applied for**

|  |  |
| --- | --- |
| Click here to enter text. |  |

**Personal Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  Click here to enter text. | **School:** |  Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date of birth:** |  Click here to enter text. |  |  |

**Contact Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Mobile phone:** |  Click here to enter text. | **Email:** |  Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Daytime phone:** |  Click here to enter text. | **Evening phone:** |  Click here to enter text. |

|  |  |
| --- | --- |
| **Address:** |  Click here to enter text. |

**Equal Opportunities**

|  |  |  |  |
| --- | --- | --- | --- |
| **Gender:** |  Click here to enter text. | **Ethnicity:** |  Click here to enter text. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Are you looking after someone at home?:** |  Click here to enter text. | **Would you like to receive advice and support?:** |  Click here to enter text. |

**Disabilities and Learning Difficulties**

|  |  |  |  |
| --- | --- | --- | --- |
| **Will you need extra support at your interview?:** |  Click here to enter text. | **What support do you need?:** |  Click here to enter text. |

**Parent or Carer's Details**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  Click here to enter text. | **Gender:** |  Click here to enter text. |
| **Relationship to you:** |  Click here to enter text. |  |  |
| **Daytime phone:** |  Click here to enter text. | **Evening phone:** |  Click here to enter text. |

|  |  |
| --- | --- |
| **Address:** |   |

**Education History**

|  |  |
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| **Are you still attending school?:** |  Click here to enter text. |

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| **Name of Current/Last school:** |  Click here to enter text. |

|  |  |
| --- | --- |
| **Start Date - End Date:** |  Click here to enter text. |

**Qualifications and Predicted Grades**

|  |  |  |
| --- | --- | --- |
| **Subject** | **Grade** | **Exam Date** |
|  Click here to enter text. |  Click here to enter text. |  Click here to enter text. |
|  Click here to enter text. |  Click here to enter text. |  Click here to enter text. |
|  Click here to enter text. |  Click here to enter text. |  Click here to enter text. |

**Employment and Work Experience**

|  |  |  |  |
| --- | --- | --- | --- |
| **Company:** |  Click here to enter text. | **Date:** |  Click here to enter text. |
| **Work experience:** |  Click here to enter text. |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Company:** |  Click here to enter text. | **Date:** |  Click here to enter text. |
| **Work experience:** |  Click here to enter text. |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Company:** |  Click here to enter text. | **Date:** |  Click here to enter text. |
| **Work experience:** |  Click here to enter text. |  |  |

**Supporting Information**

|  |  |  |
| --- | --- | --- |
| **Intended career (or career interests):** |  Click here to enter text. |  |

|  |  |  |
| --- | --- | --- |
| **Hobbies and interests:** |  Click here to enter text. |  |

|  |  |  |
| --- | --- | --- |
| **Any other information:** |  Click here to enter text. |  |

**Extra Questions**

|  |  |
| --- | --- |
| **Have you previously attended a course atOrmiston Victory Academy?:** |  Click here to enter text. |

|  |  |
| --- | --- |
| **Do you think you will need help with transport to 6th form/college?:** |  Click here to enter text. |

**Please send your completed application to the following email address:
sixthform@ormistonvictoryacademy.co.uk.**