**Application for a Sixth Form Place (External Students)**

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| Name:  | Date of Birth**:**  |
| Address (incl. postcode):Primary Parent/Guardian’s Full Legal Name:Primary Parent/Guardian’s Telephone Number:Primary Parent/Guardian’s Email address: |
| Name and address of current/previous school: | **Examinations to be taken in Summer 2024** |
| **Subjects** | **Predicted grades** |
| Contact name for Reference: |
| Position: |
| Do you have any Special Educational Needs? If so, please give details. |
| **Disability Disclosure:** *This information is required so that all applicants who consider themselves to have a disability will be offered the most appropriate support. The Disability Discrimination Act 1995 defines a disabled person as someone with a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.*Do you consider yourself to have a disability as defined by the Disability Discrimination Act? If so, please give details below: |
| Course(s) applied for (in order of preference):  |
| What do you intend to do after your Sixth Form Course? |
| Signature: | Date: |

**Please return to Melissa White, Sixth Form Study Centre Manager:** **melissawhite@chalfonts.org**