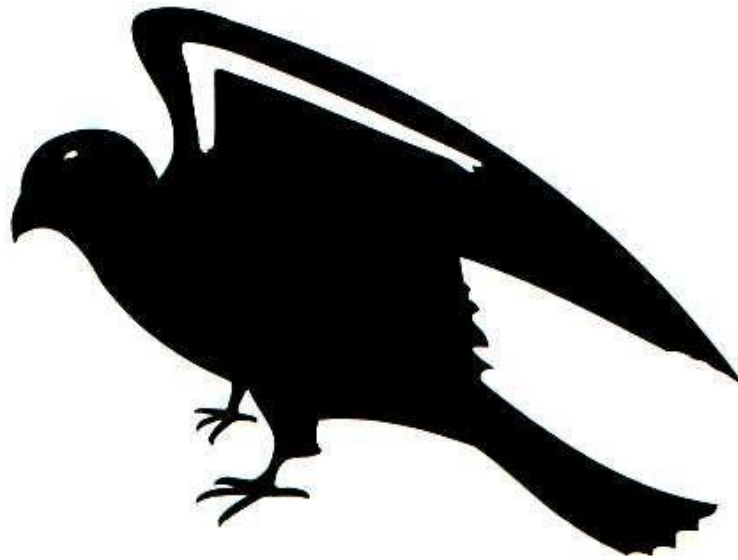


The John of Gaunt Sixth Form



Application for Entry to The Sixth Form

September 2017

Name: _____

Tutor Group: _____ **Present School:** _____

PART A: PERSONAL INFORMATION

Surname: _____

First Name(s): _____

Date of Birth: _____ Gender: _____

Parent(s)/Guardian(s) Names: _____

Home Address: _____

Post Code: _____

Home Telephone No. : _____

E mail address _____

Please state which subjects (and levels) you wish to study, in order of preference.

Order of preference	Subject	Level (A level, BTEC or Cambridge National)	For Office use Only
1			
2			
3			
4			

Please list any other subjects that you are considering studying:

Please explain briefly why you wish to study these courses:

Now complete the enclosed Recommendation Form.

Please sign below:

Student's signature: _____ Date: _____

Parent's/Guardian's signature: _____ Date: _____

PART B: ACADEMIC INFORMATION

Please list the subjects you are studying, then give this application form to your Tutor who will fill in your estimated grades and complete the final section. **The final two columns in the grid below will be completed by the member of staff who interviews you, so you only need to complete the first three columns.**

Subjects	Level (eg. GCSE/ BTEC)	Estimated Grades	Grades Achieved	Date Achieved
Mathematics				
English Language				
English Literature				
Science				

Please give brief details of any special needs or support required due to a disability or medical condition –

If applying from outside of the John of Gaunt, please provide UPN number _____

For Office Use Only

Col A	Col B	Col C	Col D	Col E

**PART C: SCHOOL REPORT
INSTRUCTIONS TO CAREERS TEACHER / HEAD OF YEAR /
FORM TUTOR**

Please complete the report form below or attach a school reference

Attitude to Study	Manner and Appearance
Motivation and Suitability for Intended Courses	Interests and Achievements
Punctuality and Attendance	Additional Comments
Relationships with Others	

Please tick if the student has been identified as being part of any of these groups

Looked After Child Special Educational Needs

English as Additional Language Able, Gifted and Talented

Signed: _____ Date: _____

Position: _____

Please return this form and the recommendation form to:

Ms L Brunt
The John of Gaunt School
Wingfield Road
Trowbridge
Wiltshire BA14 9EH
Tel: 01225 762637

THE JOHN OF GAUNT SIXTH FORM SIXTH FORM RECOMMENDATION FORM

Student Name: _____

Tutor Group: 11 _____

You **must** complete this Recommendation Sheet with your teachers and attach it to your Application Form. It is designed to help you make a sensible choice of course after listening to the advice given to you by your Teacher. You may include up to a maximum of five subjects on this form. Do not write off the idea of studying a subject until you have listened to the advice of your Teacher.

Course	Predicted GCSE/ Grade	Reason for Choice	Teacher Recommendation (1 = high, 4 = low) Signature Comment if applicable	RECOMMENDATION CODE
				1. This student is very conscientious and should be aiming for at least a Grade B at GCSE. They are therefore highly recommended for this course.
				2. This student is very hardworking. Their "predicted" GCSE grade is of a satisfactory level for this course. He/she will need to continue to work very hard to ensure a pass at Advanced level/BTEC.
				3. This student probably has the ability to pass at Advanced Level/BTEC but has not yet shown the right level of maturity and commitment. A period of "probation" is recommended should this student be accepted into the Sixth Form.
				4. This student is not recommended for this course owing to their current level of achievement or ability.

Student's Signature: _____ Parent's Signature: _____ Date: _____