



**Application Form for  
Elthorne Park High School 6<sup>th</sup> Form**  
Part of the 6<sup>th</sup> Dimension consortium  
For Admission September 2010



❖ Please type or write in **BLOCK CAPITALS** and in **BLUE** or **BLACK** ink

**Student Details**

**Surname:** ..... **Legal Surname:** .....

**Forename:** ..... **Chosen Name:** .....

**Gender:** ..... **Date of Birth:** .....

**Nationality:** .....

**Address:** .....  
.....  
.....

**Post Code:** .....

**Home telephone:** ..... **Mobile telephone:** .....

**Email address:** .....

**Home Language:** ..... **Other languages spoken:** .....

**Current School Name:** .....

**Address:** .....

**Name of Family Doctor / Practice:** .....

**Address:** .....  
.....

**Tel No:** .....

If you are applying from outside the school, please give the name, address and telephone number of one academic referee (e.g. your Head of Year) who would be willing to support your application:

**Name:** .....

**Address:** .....

**Telephone number:** .....

(Please attach recent  
passport photo here)

## Which course(s) are you applying for?

- Read the prospectus carefully, then tick one of the boxes below and complete the relevant section:

  


IB Diploma Programme (please complete **Section A only** below)

Applied or Vocational Courses (please complete **Section B only** below)

### Section A: For the IB Diploma Programme:

- Select one subject from each column
- Circle three HLs (*Higher Level*) and three SLs (*Standard Level*)

Group 1		Group 2		Group 3		Group 4		Group 5		Group 6	
<input type="checkbox"/> English	<input type="checkbox"/> Self-Study Literature course in language other than English	<input type="checkbox"/> French <input type="checkbox"/> German <input type="checkbox"/> Italian (beginners) <input type="checkbox"/> Spanish (beginners) <input type="checkbox"/> Japanese (beginners)	<input type="checkbox"/> Economics <input type="checkbox"/> Geography <input type="checkbox"/> History <input type="checkbox"/> Philosophy <input type="checkbox"/> Psychology <input type="checkbox"/> Biology	<input type="checkbox"/> Biology <input type="checkbox"/> Chemistry <input type="checkbox"/> Physics <input type="checkbox"/> Design Technology	<input type="checkbox"/> Maths HL <input type="checkbox"/> Maths SL <input type="checkbox"/> Maths Studies SL	<input type="checkbox"/> Film <input type="checkbox"/> Theatre <input type="checkbox"/> Visual Art <input type="checkbox"/> Computer Science <input type="checkbox"/> Chemistry					
HL	SL	HL	SL	HL	SL	HL	SL			HL	SL

### Section B: For Applied & Vocational Courses

- Select one or two subject(s) and circle either Level 1, 2 or 3

Please note:

- You should take into account what your GCSEs grades are likely to be

1 <sup>st</sup> Subject			2 <sup>nd</sup> Subject		
Level 1	Level 2	Level 3	Level 1	Level 2	Level 3

Do you have any dietary needs/allergies?

Please describe any Special Needs which the school should be aware of:

Do you have any younger siblings in the school currently?

Name:

Year Group:

Please describe your interests and hobbies, e.g. Sport, Musical Ability, Drama, Student Council, Posts of Responsibility. Try to explain how these activities have helped develop your skills and qualities such as team work, leadership, reliability. *(No more than 500 words)*

What are your career aspirations after completing this course? i.e. University, employment  
How will this course help you with your future? *(No more than 500 words)*

Signed: ..... (Student)

Signed: ..... (Parent/Carer)

Date: .....

### First Parent/Career to Contact

Surname: \_\_\_\_\_ Title: Mr / Mrs / Miss / Ms / Other .....

Forname/Initial: \_\_\_\_\_

Is this person already on the school database? Yes / No (please circle)

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

Post Code: \_\_\_\_\_ Email address: \_\_\_\_\_

Does the student live at this address?: Yes / No (please circle)

Home phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Work hours: \_\_\_\_\_

Which is the most likely contact number in the day? Home / Work / Mobile

Parental Responsibility? Yes / No (please circle) Court order? Yes / No (please circle)

Relationship to student (please tick)

Mother / Father  Step-Parent  Foster Parent  Career

Other family Member  Other relative

### Second Parent/Career to Contact

Surname: \_\_\_\_\_ Title: Mr / Mrs / Miss / Ms / Other .....

Forname/Initial: \_\_\_\_\_

Is this person already on the school database? Yes / No (please circle)

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

Post Code: \_\_\_\_\_ Email address: \_\_\_\_\_

Does the student live at this address?: Yes / No (please circle)

Home phone: \_\_\_\_\_ Mobile phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Work hours: \_\_\_\_\_

Which is the most likely contact number in the day? Home / Work / Mobile

Parental Responsibility? Yes / No (please circle) Court order? Yes / No (please circle)

Relationship to student (please tick)

Mother / Father  Step-Parent  Foster Parent  Career

Other family Member  Other relative

### Emergency Contact (in the event that neither of the two contacts above can be reached)

Surname: \_\_\_\_\_ Title: Mr / Mrs / Miss / Ms / Other .....

Forname/Initial: \_\_\_\_\_

Preferred phone number: \_\_\_\_\_ Home / Work / Mobile (please circle)

Relationship to student (please tick)

Mother / Father  Step-Parent  Foster Parent  Career

Other family Member  Other relative

## Travel Arrangements

Please indicate your usual mode of transport to the school site (tick one only)

- Bicycle     Train     Car/Van     Walk     School Bus     Car Share      
 London Underground     Public Bus Service     Metro/Train/Light Rail     Other

Has anyone in your family been to University?                      Yes / No

### **Photographs and Videos**

From time to time we use photographs and films of our students for publicity purposes in brochures, films, pamphlets, our website and other educational websites that we contribute towards.

We would like your permission to use your picture should the need arise.

- I agree for photos and moving images of myself to be used in brochures, web pages, the press etc.

### **Ethnic background (based on the national population Census ethnic categories)**

<b>White</b>	<input type="checkbox"/> British
	<input type="checkbox"/> Irish
	<input type="checkbox"/> Traveller of Irish heritage
	<input type="checkbox"/> Gypsy/ Roma
<b>Other White Background</b>	<input type="checkbox"/> White Eastern European
	<input type="checkbox"/> White Western European
	<input type="checkbox"/> Other
<b>Mixed</b>	<input type="checkbox"/> White and Black Caribbean
	<input type="checkbox"/> White and Black African
	<input type="checkbox"/> White and Asian
	<input type="checkbox"/> Any other mixed group
<b>Chinese</b>	<input type="checkbox"/> Any Chinese group
<b>Asian Or Asian British</b>	<input type="checkbox"/> Indian
	<input type="checkbox"/> Pakistani
	<input type="checkbox"/> Bangladeshi
<b>Any other Asian background</b>	<input type="checkbox"/> African Asian
	<input type="checkbox"/> Other

<b>Black or Black British</b>	<input type="checkbox"/> Caribbean
	<input type="checkbox"/> Ghanaian
	<input type="checkbox"/> Nigerian
	<input type="checkbox"/> Somali
	<input type="checkbox"/> Other Black African
	<input type="checkbox"/> Any other Black background
<b>Any Other Ethnic Group</b>	<input type="checkbox"/> Afghan
	<input type="checkbox"/> Arab other
	<input type="checkbox"/> Iranian
	<input type="checkbox"/> Iraqi
	<input type="checkbox"/> Japanese
	<input type="checkbox"/> Latin/ South/ Central American
	<input type="checkbox"/> Any other ethnic group
<b>This information was provided by</b>	<input type="checkbox"/> Parent/Guardian
	<input type="checkbox"/> Pupil

### **Religion:**

- |   |   |  |  |   |
|---|---|--|--|---|
| <input type="checkbox"/> Anglican (Church of England) | <input type="checkbox"/> Methodist            | <input type="checkbox"/> Baptist               | <input type="checkbox"/> Buddhist          | <input type="checkbox"/> Christian      |
| <input type="checkbox"/> Hindu                        | <input type="checkbox"/> Humanist             | <input type="checkbox"/> Jain                  | <input type="checkbox"/> Muslim            | <input type="checkbox"/> Jewish         |
| <input type="checkbox"/> United Reform Church         | <input type="checkbox"/> Zoroastrian/ Parsee  | <input type="checkbox"/> Seventh Day Adventist | <input type="checkbox"/> Muslim - Shi'a    | <input type="checkbox"/> Muslim - Sunni |
| <input type="checkbox"/> Orthodox (Christian)         | <input type="checkbox"/> Salvation Army       | <input type="checkbox"/> Quaker                | <input type="checkbox"/> Rastafarian       | <input type="checkbox"/> Sikh           |
| <input type="checkbox"/> Roman Catholic               | <input type="checkbox"/> Shinto               | <input type="checkbox"/> Mormon                | <input type="checkbox"/> Jehovah's Witness | <input type="checkbox"/> Ravidasian     |
| <input type="checkbox"/> No Religion                  | <input type="checkbox"/> Other religion ..... |  | <input type="checkbox"/> Baha'i            | <input type="checkbox"/> Pagan          |

# Reference for .....

## Academic Qualifications Achieved

Subject	Level/Qualification	Grade	Date
Citizenship	GCSE (short)		

## Academic Predictions

Subject	Level/Qualification	Predicted Grade
English	GCSE	
English Literature	GCSE	
Mathematics	GCSE	

## Personal Qualities

	Excellent	Good	Satisfactory	Some Concern	Serious Concern
Organisation					
Work Ethic					
Behaviour					
Ability to meet deadlines					
Ability to take direction					
Ability to work with others					

Attendance  %  
 Punctuality  %

Has this student been excluded from Year 10 or Year 11?

If yes, please give details and number of days

Yes / No	
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## Comments

Signed on behalf of the School:

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

Position: \_\_\_\_\_ Date: \_\_\_\_\_