

APPLICATION FORM

SIXTH FORM PERSONAL INFORMATION FORM

CURRENT SCHOOL _____

PERSONAL DETAILS

NAME: _____

DATE OF BIRTH:

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GENDER:

☐

MALE

☐

FEMALE

ADDRESS: _____

POSTCODE:

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MOBILE/TEL NUMBER: _____

EMAIL ADDRESS: _____

CONTACT DETAILS FOR PARENT(S) / GUARDIAN

NAME: _____

RELATIONSHIP: _____

ADDRESS: _____

POSTCODE:

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MOBIEL/TEL NUMBER: _____

EMAIL ADDRESS: _____

CAREER ASPIRATIONS (please tick any areas you may be interested in)

<input type="checkbox"/> Agriculture	<input type="checkbox"/> IT	<input type="checkbox"/> Public Services
<input type="checkbox"/> Animal Care	<input type="checkbox"/> Languages	<input type="checkbox"/> Retail
<input type="checkbox"/> Arts/Media	<input type="checkbox"/> Law/Business	<input type="checkbox"/> Science/Maths
<input type="checkbox"/> Construction	<input type="checkbox"/> Leisure/Sport	<input type="checkbox"/> Social Sciences
<input type="checkbox"/> Engineering	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> Teaching
<input type="checkbox"/> Healthcare	<input type="checkbox"/> Medicine	<input type="checkbox"/> Other _____
<input type="checkbox"/> Horticulture	<input type="checkbox"/> Motor Vehicle	_____

SUBJECTS YOU WISH TO STUDY

Pathway A	_____	Venue	_____
Pathway B	_____	Venue	_____
Pathway C	_____	Venue	_____
Pathway D	_____	Venue	_____
Pathway E	_____	Venue	_____

ADDITIONAL INFORMATION

I confirm that the information on this form is correct:

Signature of Application _____ Date: _____

Please also complete the 6th Form Agreement form and the Options form and submit this form to Mrs Wheatley, 6th Form Support Officer, Bassaleg School, Forge Lane, Bassaleg, Newport, NP10 8NF

YEAR 12 – 6TH FORM AGREEMENT

NB – Please read conditions carefully before you sign.

I agree to meet the following conditions:

1. I will attend all registrations and lessons consistently and punctually.
2. I agree that my attendance must stay above 90%
3. I agree to use non-contact time for completing work/additional study.
4. I agree to attend at times set aside for events specifically arranged for the 6th Form.
5. I will remain on the school site during teaching time unless attending lessons at an alternative site
6. In the event of any anticipated absence, I will immediately inform my form tutor and subject tutors.
7. As a result of any absence, I will hand a note signed by my parent/guardian to my form tutor within two school days.
8. On the first school day following an absence I will consult my subject tutors and make good the lost time within a negotiate period.
9. Assignments will be handed in to meet set deadlines and will be completed to the best of my ability. In the event of a missed deadline, work may not be assessed by subject staff; work will have to be completed and parents/guardians informed.
10. I will act as a role model for the rest of the school at all times. This includes strict adherence to the school uniform and jewellery policies.
11. I will not park my car on the school site.
12. In all the above I fully understand that it is my choice to join Bassaleg/Newport West Consortium 6th Form and therefore accept all the rules and regulations of the educational establishments. I further understand that if I do not comply with the rules and regulations disciplinary action may ensue.

Signed _____ (student) Date _____

Print Name _____

Parent/Guardian Signature _____ Date _____

BASSALEG SCHOOL 6TH FORM REFERENCE REQUEST FOR EXTERNAL STUDENTS ONLY

Information on this form will be held by us under the terms of the data protection act and used for managing the entry process, planning our provision and monitoring equality of opportunity for all our students.

The student below has expressed an interest in studying an advance level course at Bassaleg School and has indicated that you are willing to supply a reference. Thank you for your help, it is much appreciated.

Students Name _____

Students DOB

Current School _____

Reference Completed by _____ Position _____

Please confirm the dates between which the student attended the school/college:

Date of joining / / Date of Leaving / /

Qualifications

We would appreciate it if you would indicate the grades that you expect the student to achieve in the table below.

Level (GCSE or other)	Qualification title (must include Maths & English)	Grade (actual or predicted)

Confirmation of authority to disclose personal information. I give you my permission to supply Bassaleg School with the information requested. If not named above, I also give permission for my current (or last) school or college to supply an additional reference.

Signature of student _____ Date _____

Sign above to assure your referee that we have your permission to request this reference. Thank you

Cont.

We would appreciate it if you would indicate the student's aptitudes in the table below:

Attendance %	<input type="checkbox"/> excellent <input type="checkbox"/> good <input type="checkbox"/> satisfactory <input type="checkbox"/> below expectation <input type="checkbox"/> poor <input type="checkbox"/> very poor Comment:
Punctuality	<input type="checkbox"/> excellent <input type="checkbox"/> good <input type="checkbox"/> satisfactory <input type="checkbox"/> below expectation <input type="checkbox"/> poor <input type="checkbox"/> very poor Comment:
Attitude to study	<input type="checkbox"/> excellent <input type="checkbox"/> good <input type="checkbox"/> satisfactory <input type="checkbox"/> below expectation <input type="checkbox"/> poor <input type="checkbox"/> very poor Comment:
Determination	<input type="checkbox"/> excellent <input type="checkbox"/> good <input type="checkbox"/> satisfactory <input type="checkbox"/> below expectation <input type="checkbox"/> poor <input type="checkbox"/> very poor Comment:
Maturity	<input type="checkbox"/> excellent <input type="checkbox"/> good <input type="checkbox"/> satisfactory <input type="checkbox"/> below expectation <input type="checkbox"/> poor <input type="checkbox"/> very poor Comment:
Aptitude for advance level study	<input type="checkbox"/> excellent <input type="checkbox"/> good <input type="checkbox"/> satisfactory <input type="checkbox"/> below expectation <input type="checkbox"/> poor <input type="checkbox"/> very poor Comment:
Suitability for chosen courses	<input type="checkbox"/> excellent <input type="checkbox"/> good <input type="checkbox"/> satisfactory <input type="checkbox"/> below expectation <input type="checkbox"/> poor <input type="checkbox"/> very poor Comment:
Other Information Example health, specific learning difficulties, particular requirement for examinations, need for support in English as a second language	

Signature of referee _____ Date _____

Name of referee _____

School / college _____

Position _____

Mrs Wheatley, 6th Form Support Officer, Bassaleg School, Forge Lane, Bassaleg, Newport, NP10 8NF