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|  | **St Bede’s Catholic College**  **Areté Sixth Form**  Year 12 Application Form – Admission September 2019  Closing date for applications 9th January 2019 | autothumb_scirgb |

**Personal Details**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Surname: | | | | | Forename(s): | | | | | |
| Date of Birth:  Address:  Post Code:  Home Telephone Number: Mobile Telephone Number:    Email: | | | | | | | | | | |
| Parent/Carer contact details (*Details of one or two parents/carers may be supplied):*  Surname:  Forename:  Title:  Relationship:  Email: Home Telephone Number:  Address (if different to student) | | | | | | | | | | |
| Unique Learner Number *(available from your school)* | | | | | | | | | | |
|  |  |  |  |  | |  |  |  |  |  |
| Are you a baptised Catholic? *(Please tick as appropriate)* | | | | | | | Yes | | No | |
| Are you a child who is or has previously been in local authority care? *(Please tick as appropriate)* | | | | | | | Yes | | No | |

**A Level Subject Choice in the order of your preference**

Please choose at least 3 courses and a reserve. (If there is a subject you would like to study which is not included in our subject list please name it on the bottom of the subject choice list)

|  |  |
| --- | --- |
| **Order** | **Subject** |
| 1st Choice |  |
| 2nd Choice |  |
| 3rd Choice |  |
| 4th Choice\* |  |
| 1st Reserve |  |
| 2nd Reserve |  |

\*Only a student with all grades at 8/9 in all subjects would be expected to study 4 A levels

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| **Additional subjects** |
| Please indicate here if there is a subject that we do not provide that you would wish to have studied. We may be able to provide this subject, if there is sufficient interest or with the co-operation of other schools. |

|  |  |  |
| --- | --- | --- |
| **Do you currently hold a valid UK Passport?** *(Please tick as appropriate)* | **YES** | **NO** |
| If not then please indicate here what your official citizenship status and UK residency status is : | | |

Signed: ……………………………………….. Date: …………………………….

*Student*

Signed: ……………………………………….. Date: …………………………….

*Parent/Guardian*

**Please send to:**

Ms L Kirkbright, Director of Sixth Form

St Bede’s Catholic College, Long Cross, Lawrence Weston, Bristol, BS11 0SU

**It is important that you are available for enrolment on Thursday 22nd August 2018 or Friday 23rd August 2019. If there is a problem with either of these, please indicate this on your form.**

*Data Protection Act 1998- the information on this form will be passed on to the Chief Executive of Skills Funding, and where required, the Education Funding Agency to enable those organisations to fulfil their statutory obligations principally under Apprenticeships, Skills, Children and Learning Act 2009. Both organisations are registered as data controllers with the UK Information Commissioner's Office. The information you provide may be shared with other organisations for purposes of administration, the provision of career and other guidance and statistical and research purposes, relating to education or training.*

*I agree to the information I have given on this form being recorded and stored according to the conditions of the Data Protection Act 1998.*

**Signature of Student or Parent / Guardian:**

……………………………………………………………………... **Date**…………………………….