



St Thomas More Catholic School

SIXTH FORM APPLICATION

PLEASE COMPLETE ALL SECTIONS CLEARLY
IN CAPITAL LETTERS IN BLUE OR BLACK INK.

YOUR APPLICATION CANNOT BE PROCESSED
WITHOUT THIS INFORMATION.

For Office Use Only:

Received	
Interview Date:	
Offer Made:	
Photo Taken:	

CONTACT DETAILS

Family Name:
Forenames:
Age at 31 August 2012:
Home Telephone Number:
Mobile Telephone Number:
Email Address:

Date of Birth:
Gender:
Home Address:
Post Code:
Borough:

Mother or Legal Guardian: *(circle as appropriate)*

Full Name:
Mobile:
Email Address:
Home Address <i>(if different from above)</i>
Post Code:

Father or Legal Guardian: *(circle as appropriate)*

Full Name:
Mobile:
Email Address:
Home Address <i>(if different from above)</i>
Post Code:

CORRESPONDENCE RELATING TO YOUR PROGRESS SHOULD BE SENT TO:
MOTHER OR LEGAL GUARDIAN / FATHER OR LEGAL GUARDIAN / BOTH
(Circle as appropriate)

PERSONAL DETAILS

Nationality (as on passport):
Religion:
Emergency contact name: (preferably Parent or Guardian)
Emergency telephone number: (preferably Mobile)

	Please tick box	YES	NO
Have you been living in the UK or EU for the last three years?			
Are you an Asylum Seeker?			
Are you a Refugee?			
Date of arrival in the UK:			

This information will not affect your application, but a copy of your most recent IND papers will be required for our records.

EDUCATIONAL SUPPORT NEEDS

We are concerned to make sure you get any support you may need. Please tick Yes or No if you have had support in any of these areas.

Disclosing support need will not affect your application.

Do you have any health needs which significantly affect your daily life?	Yes		No	
If yes please specify:				
Do you have a disability or access need?	Yes		No	
If yes please specify:				
Do you have any learning difficulties? (e.g. Dyslexia)	Yes		No	
Do you receive additional support at school?	Yes		No	
Have you received additional support arrangements for exams?	Yes		No	
Please give details of your support needs.				

WHITE	MIXED	ASIAN or ASIAN BRITISH	BLACK or BLACK BRITISH	CHINESE
British	White & Black Caribbean	Indian	Caribbean	Chinese
Irish	White & Black African	Pakistani	Ghanian	
Gypsy/Roma	White & Asian	Bangladeshi	Nigerian	ANY OTHER ETHNIC BACKGROUND
Greek Cypriot	Other white background (please write below)	Other Asian background (please write below)	Somali	Latin/South/Central America
Kosovan			Zairian/Congolese	Kurdish
Turkish Cypriot			Other African	Vietnamese
Turkish			Other Black background (please write below)	Other ethnic background (please write below)
Albanian				
Other white background (please write below)				

Is English your first language?	Yes		No	
What is the main language spoken in your home?				

Name of School/College	School/College Borough
Start date at current/last School/College:	Finish date at current/last School/College:

COURSES YOU WANT TO STUDY

Please write in Subject(s) and Level (Type of Qualification). A list of courses is attached.

Subject	Type of Qualification (e.g. AS, BTec, GCSE)

EXAMINATIONS TAKEN OR TO BE TAKEN

SUBJECT	TYPE OF EXAM (eg GCSE)	DATE OF EXAM	GRADE	SUBJECT	TYPE OF EXAM (eg GCSE)	DATE OF EXAM	GRADE

STATEMENT OF APPLICANT

Please read the following statement and sign your agreement below

I wish to apply for admission to the full-time course described in the Sixth Form Prospectus. If offered a place in the St Thomas More Sixth Form, I agree to comply with the general regulations, policies and procedures of the school .

I certify that the information given in the application is correct to the best of my knowledge.

Signature: Date:

Parent/Guardian Signature: Date:

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You can also download a copy of this application form at: www.stthomasmoreschool.org.uk

Completed application form to be returned to:
Mrs T Stanford
General Office
St Thomas More School
Glendale Avenue
Wood Green
London
N22 5HN

SCHOOL/COLLEGE REFERENCE SECTION

NAME OF STUDENT:

YOUR APPLICATION CANNOT BE PROCESSED WITHOUT A COMPLETED SCHOOL/COLLEGE REFERENCE

To the Student: Thank you for completing your part of the application form.

To the Referee: Please complete the reference section below clearly in BLOCK CAPITALS

Please list subjects, examinations and estimated grades below:

SUBJECT	EXAM (IF NOT GCSE)	ESTIMATED GRADE
MATHS		
ENGLISH LANGUAGE		

SUBJECT	EXAM (IF NOT GCSE)	ESTIMATED GRADE

Please tick the most appropriate boxes

	EXCELLENT (96%)	GOOD (92%)	AVERAGE (88%)	BELOW AVERAGE (84%)	POOR (<80%)
Attendance (please state % if available)					
Punctuality (please state % if available)					
Motivation					
Self-Discipline					
Relationship with staff					
Relationship with students					

Further comment if required

Is this student applying for a course appropriate to their abilities?

Please comment further on personal qualities or extra-curricular activities, if appropriate:

Name: Position:

Signature: Date:

School stamp: