



ASHMOLE SCHOOL EXTERNAL APPLICATION FORM FOR POST 16 EDUCATION

FULL NAME: **Date of Birth:**
[Enclose a copy of birth certificate or passport]

HOME ADDRESS:.....

Post Code: **Borough in which student lives:**

Home Phone Number: **Gender:** Male / Female

PARENT'S NAMES:

PARENT'S ADDRESS (If different from above):

.....

Parent's Mobile Phone Number(s):

Parent's E.mail address:

PRESENT SCHOOL:**Year Group/Form**.....

SCHOOL ADDRESS:

NAME OF HEADTEACHER:

TELEPHONE NO:

ANY OTHER SECONDARY SCHOOLS ATTENDED:

EXAMINATION DETAILS:

Examinations <u>STILL TO BE</u> taken. Include diploma/certificate programmes			Examinations already taken. Include diploma/certificate programmes			
Subject	Date	Level	Subject	Level	Date	Grade

Please consult the Post 16 Subject Information Booklet and list the courses you wish to study in Year 12.

1. _____
2. _____
3. _____
4. _____

Statement in support of your Application.

(Please indicate your strengths and weaknesses, career plans (if known) and any other interests)

Signed (Student): Date:

Signed (Parent/Carer): Date:

**Please return your application form together with a copy of your birth certificate/passport and if applicable [overseas applicants only] proof of the right of abode in the UK, to:
The Admissions Secretary, Ashmole School, Cecil Road Southgate London, N14 5RJ
If you wish your application form to be acknowledged, please enclose a SAE.**