



ENROLMENT NUMBER:  
20/

Please complete this form using block capitals and black ink. Students who are successful in their application will be invited to an interview, as part of the selection procedure.

**ABOUT YOU YOUR DETAILS**

**SECTION A**

Surname  Forename(s)

Address  Town

Borough  County  Postcode

Present School  School Postcode

Gender  Date of Birth (dd/mm/yyyy)  Student Email

Student Mobile  Home Telephone  First Language

Religion Catholic  Other Christian  Other faith  please specify  No religion

CTK is asked by the Education and Skills Funding Agency to record the ethnic origin for each student as part of the Individual Student Record return. The information provided will be used for statistical purposes only and will be treated with the utmost confidence.

**White**  
English/Welsh/Scottish/Northern Irish/British  Irish   
Gypsy or Irish Traveller  Any other White background

**Mixed/Multiple ethnic groups**  
White and Black Caribbean   
White and Black African   
White and Asian   
Any other Mixed/Multiple ethnic background

**Asian/Asian British**  
Indian  Pakistani  Bangladeshi  Chinese   
Any other Asian background

**Black/African/Caribbean/Black British**  
African  Caribbean   
Any other Black/African/Caribbean background

**Other Ethnic Group**  
Arab  Any other ethnic group

**PARENT(S)/CARERS(S)** Please provide the details of two parents/carers who have responsibility for you.

**SECTION B**

**1. PARENT/CARER**

Surname  Forename(s)

Address

Mobile No.  Email

**2. PARENT/CARER**

Surname  Forename(s)

Address

Mobile No.  Email

**SUPPORTING STATEMENT** Please tell us about your career interests, hobbies or special achievements.

**SECTION C**

**REFERENCE**

Please give the name of your Head of Year 11 in order for us to request a reference:

**SUBJECTS/PREDICTED GRADES****SECTION D**

Please list all GCSE subjects and other examination programmes to be taken. You should complete this section to the best of your ability based on any information you have. A separate request for this data will be sent to your school.

GCSE	Predicted Grade	GCSE	Predicted Grade	BTEC courses	Predicted Grade
MATHS	<input type="text"/>	GEOGRAPHY	<input type="text"/>	<input type="text"/>	<input type="text"/>
ENGLISH LANGUAGE	<input type="text"/>	HISTORY	<input type="text"/>	<input type="text"/>	<input type="text"/>
ENGLISH LITERATURE	<input type="text"/>	MEDIA	<input type="text"/>	<input type="text"/>	<input type="text"/>
ART	<input type="text"/>	PE	<input type="text"/>	<input type="text"/>	<input type="text"/>
COMBINED SCIENCE	<input type="text"/>	RE	<input type="text"/>	<input type="text"/>	<input type="text"/>
BIOLOGY	<input type="text"/>	Other GCSE courses	Predicted Grade	OTHER courses	Predicted Grade
CHEMISTRY	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PHYSICS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
BUSINESS	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
DRAMA	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
COMPUTER SCIENCE	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FRENCH	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SPANISH	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**PREFERRED PROGRAMME OF STUDY** Please tell us the courses you wish to apply for.**SECTION E****A LEVELS**
  
  
  

**BTECS**

Technical Extended Diploma Level 3

Technical Intermediate Diploma Level 2

I would like to take a resit GCSE in: English  Maths

**SUPPORT NEEDS****SECTION F**

In order to make sure we meet your needs whilst at college you are asked to provide full details of any support needs you may have in the section below. This will be treated as confidential and will not affect the outcome of the application.

Do you have an Education, Health and Care Plan issued to you by a Local Authority? Yes  No

If "Yes" please tell us which Local Authority issued the Plan.

Have you previously been issued with any professional reports? For example from a Psychologist, a Specialist Dyslexia Assessor or a Speech and Language Therapist, that you could provide us with? Yes  No

If "Yes" please state from which professionals the reports are from.

Are you registered disabled? Yes  No

Do you require support with English as an additional language? Yes  No

Do you give permission for us to discuss appropriate information with relevant staff? Yes  No

If you have any learning difficulties, disabilities or medical conditions to disclose, please state below.

Please indicate any personal/family circumstances of which you would like the College to be aware?

**DECLARATION****SECTION G**

This application will be processed in accordance with Christ the King Sixth Forms' Privacy Notice for Students and within the terms specified by the Data Protection Act 1998. You hereby explicitly consent to Christ the King Sixth Forms collecting, holding and otherwise processing personal data (including 'sensitive' personal data) relating to you for the purposes necessary within our student application process.

Applicant Signature

Date

Parent/Guardian Signature

Date

**DATA PROTECTION**

We will use and store the information you have provided in order to process your application to study at Christ the King Sixth Forms and to put plans in place where needed to ensure your success when you join us. You will receive email and text updates about your application, invitations to interviews, details of open events, enrolment events and other information about your course and the college. You can unsubscribe to these communications at any time by clicking on the unsubscribe button in emails or contacting us at enquiries@ctksfc.ac.uk. Please refer to the Privacy Notice for students on our website for further information.