



# GREENFORD POST 16 CENTRE

FULL-TIME COURSE APPLICATION FORM - SESSION 2010/2011

LADY MARGARET ROAD, SOUTHALL, MIDDLESEX. UB1 2GU

TEL: 020 8578 9152 FAX: 020 8747 7891

Greenford High  
School Applicants  
Only

Form: \_\_\_\_\_

All students must  
attach a recent photo  
of yourself here  
**(Applications cannot  
be considered  
without a photo)**

**NAME:** \_\_\_\_\_

**UNIQUE PUPIL NUMBER (UPN):**

**UNIQUE CANDIDATE NUMBER (UCI):**

(It is very important that **BOTH** these number be provided at registration and can be obtained from your school)

*The school is registered in accordance with and complies with the requirements of the Data Protection Act 1998. All information provided by applicants is treated in strictest confidence by the school.*

**Please complete the form in BLOCK CAPITAL and in BLACK or BLUE pen.**

1. Mr  Ms

**Surname:** \_\_\_\_\_ **First Names:** \_\_\_\_\_

**Date of Birth:** \_\_\_/\_\_\_/\_\_\_ **Email address:** \_\_\_\_\_

**Age on 1<sup>st</sup> September (year course starts):** \_\_\_\_\_ **years/months**

2. **Your home address:**

\_\_\_\_\_  
\_\_\_\_\_

**Postcode:** \_\_\_\_\_ **Telephone No:** \_\_\_\_\_

**Have you any siblings in the school: YES/NO?**  **Year Group/Form:** \_\_\_\_

3. **Nationality:** \_\_\_\_\_

4. **This section need only be completed if you have ever lived outside the UK. If you are not a British or EU National, how were you admitted to the UK? (please tick)**

For permanent settlement	<input type="checkbox"/>	As a visitor	<input type="checkbox"/>
As a refugee/asylum seeker	<input type="checkbox"/>	With a student visa	<input type="checkbox"/>
With a work permit	<input type="checkbox"/>	Other (specify)	_____

**Date of entry to UK:** \_\_\_\_\_

If you are a Greenford High School student please go to Section 7.

5. Please give name and full address of last school/college attended:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Name of person who would supply a school/college reference:

\_\_\_\_\_

7. Qualifications gained or to be taken:

Subject/Module	Awarding Body	Level	Date of Exam/ Assessment	Grade
English Language				
English Literature				
Mathematics				
Science				

8. Planning Statistics (these will not be used for selection purposes)

Ethnic origin: \_\_\_\_\_ Religion: \_\_\_\_\_ Mother tongue: \_\_\_\_\_

9. Special Requirements:

a. Have you ever received classroom support. If so what for? EAL  SEN

\_\_\_\_\_

b. Medical Conditions:

Do you have a medical condition that we need to know about? Yes  No

If yes please state what it is \_\_\_\_\_

Do you have to take any medication on a regular basis? Yes  No

If yes please state what it is \_\_\_\_\_

I hereby apply to Greenford Post 16 Centre as a full-time student and declare that the information given on this form is correct.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Parent/Guardian (Required if under 18): \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Contact Tel. No: \_\_\_\_\_  
(Block Capitals Please)

Title: Mr/Mrs/Miss/Ms \_\_\_\_\_ Other: (Please State) \_\_\_\_\_

Relationship to Student: \_\_\_\_\_

Greenford High School  
 Lady Margaret Road  
 Southall, Middlesex, UB1 2GU  
 Headteacher: Mr M. Cramer, BA Hons, MA

T: 0208 578 9152  
 F: 0208 747 7891  
 E: office@admin.greenford.ealing.sch.uk  
 www.greenford.ealing.sch.uk



**Greenford  
 High School**

**REQUEST FOR REFERENCE**

<b>Students' Name:</b>	<b>D.O.B:</b>
<b>Institution Name:</b>	

The above named student has applied for a place at Greenford High School Post 16 Centre.

Could you please complete the following pro-forma and return it to Greenford High School by 1<sup>st</sup> July. Students must have a completed reference **before** they may enrol at Greenford Post 16 Centre. Many Thanks.

	Very Good	Good	Satisfactory	Poor
<b>Attendance</b>				
<b>Punctuality</b>				
<b>Ability</b>				
<b>Behaviour</b>				

SATS SCORE	
English	
Maths	
Science	

CATS SCORE	
Verbal	
Non Verbal	
Quantitative	

**Student's Unique Pupil Number -**

**SEN (Special Educational Needs) Use a separate sheet if required**

Any further comments (in confidence) can be made in the space provided below. If possible please include predicted grades.

**Additional comments (in confidence)**

Signed ..... Date .....

Name and Designation .....

Thank you for your assistance with this request.

