



# SIXTH FORM APPLICATION FORM

## Student Details

|                                     |  |
|-------------------------------------|--|
| Name of Student                     |  |
| Date of Birth                       |  |
| Address                             |  |
| Postcode                            |  |
| Name of current school or setting   |  |
| Name of person completing this form |  |
| Relationship to student             |  |

## Application

|                                                                                                                                                                                                                                                                                                                                                      |                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| I am aware that the Bidwell Brook / Ellen Tinkham Sixth Form is not the only option and there are colleges my young person could attend for Further Education                                                                                                                                                                                        | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| I have received information about the Bidwell Brook / Ellen Tinkham Sixth Form Curriculum                                                                                                                                                                                                                                                            | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| I have visited or would like to visit the Bidwell Brook / Ellen Tinkham Sixth Form                                                                                                                                                                                                                                                                   | Visited / Would like to visit                            |
| I realise that the focus for post-16 education is to continue developing independence for life and/or work. I will support my young person fully in developing independence skills, transferring this from school to home, and home to school, and understand that they will participate in all activities unless there is a specific medical reason | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Reasons I am applying on behalf of my young person for a place at Bidwell Brook / Ellen Tinkham Sixth Form                                                                                                                                                                                                                                           |                                                          |
|                                                                                                                                                                                                                                                                                                                                                      |                                                          |

## What are the long term objectives I would like my young person to achieve?

|                                                                      |
|----------------------------------------------------------------------|
| <b>EDUCATION AND EMPLOYMENT - Overarching Long Term Objective(s)</b> |
|                                                                      |
| <b>INDEPENDENT LIVING - Overarching Long Term Objective(s)</b>       |
|                                                                      |
| <b>COMMUNITY INCLUSION - Overarching Long Term Objective(s)</b>      |
|                                                                      |
| <b>HEALTH - Overarching Long Term Objective(s)</b>                   |
|                                                                      |

## Declarations

|                                   |  |             |  |
|-----------------------------------|--|-------------|--|
| <b>Signed: Parent/Carer</b>       |  | <b>Date</b> |  |
| <b>Full name (block capitals)</b> |  |             |  |

Please return this completed application form to  
Bidwell Brook / Ellen Tinkham Reception by the end of the Autumn Term.  
If you require any more information, please contact the Head of Site.