

St John Fisher Catholic High School

Sixth Form Subject Selection – September 2019

Name		Current School/Form	
Address (inc. Postcode)		Date of Birth	
		Tel. No.	
Email		Mobile No.	

Please select a total of 4 from the subjects listed below in priority order:

A Level Biology (AQA)		A Level Religious Studies (Edexcel)	
A Level Chemistry (AQA)		A Level Sociology (OCR)	
A Level Classical Civilisation (OCR)		A Level Spanish (AQA)	
A Level English Language (OCR)		Level 3 Introductory Diploma in IT & Level 3 Diploma in IT (Cambridge Technicals)	
A Level French (AQA)		Level 3 Diploma in IT (Cambridge Technicals)	
A Level Geography (Edexcel)		OCR Cambridge Nationals Level 2 Certificate in Sport Studies	
A Level History (Edexcel)		OCR Level 3 Cambridge Technical Diploma in Health and Social Care	
A Level Mathematics (Edexcel)		OCR Level 3 Cambridge Technical Extended Diploma in Health and Social Care	
A Level Media (AQA)		OCR Level 3 Cambridge Technical Diploma in Sport and Active Leisure	
A Level Psychology (AQA)		OCR Level 3 Cambridge Technical Extended Certificate in Business	

Reasons for applying for these courses. Include future career interests.

Other information you wish to include (hobbies, interests and previous achievements).

Signed by student: Date:

Statement by parent/carer: This application has my consent:

Signed: Date:

(Parent/Carer)

Application for Sixth Form Admission - Sept 2019

For completion by External applicants only

Please complete all the information below and provide copies of the following documents:

- Baptismal Certificate
- Passport or Birth Certificate
- Proof of home address (Rent book or utility bill)
- Any reports you may have from your previous school.

Family Name..... Male/Female(delete as applicable)

First Name(s) Date of Birth

Home Language..... Current Year Group.....

Date of Entry to UK (if applicable).....

Home Address

Postcode Home Telephone Number

Full name of Mother/Guardian

Day time telephone number.....

Full name of Father/Guardian

Day time telephone number.....

Religion Place of Baptism

(a copy of the Baptismal Certificate is required as proof of baptism)

Name and Address of Church or Other Place of Worship

Name of Priest, Minister of Religion or Leader of Faith Community to whom the family is known

Present/Previous School

Address Postcode

Date of Admission Date of Leaving

Name(s) of brothers/sisters at St John Fisher Catholic High School

..... DOB Year Group.....

..... DOB Year Group.....

Reason for choosing St John Fisher School:

Compassionate factors you would like the Governors to take into account:

Any other information you wish to be considered:.....

Declaration (to be completed by the parent):

To the best of my knowledge the information given in this application is correct. I agree to notify the Governors of St John Fisher School immediately of any change of address or other circumstances.

Signed Name

Relationship to Child Date

Please return to: Miss C Wilson, St John Fisher Catholic High School, Park Lane, Peterborough, PE1 5JN