



Campion School

Royal Leamington Spa

Sixth Form Application Form

Please fill this in as accurately as possible and return it to Campion School reception or email to peterf1@campion.warwickshire.sch.uk and/or mandeeps1@campion.warwickshire.sch.uk

Name		
Form Group		
Referee 1 (name and contact details)		
Referee 2 (name and contact details)		
Current predicted grades	Subject	Predicted grade (if applicable)
	English Language	
	English Literature	
	Maths	
	Science	
	Geography	
	History	
	French	
	Spanish	

Having looked at the subjects we offer on the minimum requirements sheet, please state your choices. Our option blocks will be built around your choices. You may pick four subjects but three is the recommended number.

Option 1

Option 2

Option 3

Option 4

For external students only

Current School (name and address)		
Home Address		
Parental/Carer Contacts	<u>Contact 1</u>	<u>Contact 2</u>
	Relation to child: Home number: Mobile number: Email address:	Relation to child: Home number: Mobile number: Email address:

Date of Birth			
Gender (please tick)	Male		
	Female		
Ethnic Origin (please tick)	Any other Asian Background		
	Any Other Black Background		
	Any Other Ethnic Group		
	Any Other Mixed Background		
	Any Other White Background		
	Bangladeshi		
	Black – African		
	Black – Caribbean		
	Chinese		
	Gypsy/Roma		
	Indian		
	Pakistani		
	Traveller of Irish Heritage		
	White – British		
	White – Irish		
	White and Asian		
White and Black African			
White and Black Caribbean			
SEND Register (please tick)	Yes		
	No		
	<i>If yes, please select from below:</i>		
	1. SEN Support		
	2. EHC Plan		
	3. Autistic		
	4. Sensory Impairment		
	5. Physical Disability		
	6. Attention Deficit Disorder		
	7. SEMH		
	8. SLCN		
	9. Learning Difficulty		
<i>Please give details of any exam access arrangements:</i>			

EAL (please tick)	Yes		
	No		
Free School Meals	Entitled? (please tick)	Yes	
		No	
	Claiming? (please tick)	Yes	
		No	
Any involvement of outside agencies? (please tick if appropriate)	ESW		
	Social Services		
	Court		
	NSPCC		
	YOT		
	Ed. Psych.		
	<i>Please provide further information:</i>		
If Looked After – copy of report to be sent to parents?	Yes		
	No		
	<i>Please provide name of social worker if known:</i>		