



LATE APPLICATION FOR SEPTEMBER 2017 ENTRY

Your Personal details	
Surname	
First name/s	
Address (including postcode):	
Main contact tel no.	
Date of birth	
Sex	M <input type="checkbox"/> F <input type="checkbox"/> Other <input type="checkbox"/>
Your country of birth	
Your nationality	

Additional Support	
Do you have a disability?	Y <input type="checkbox"/> N <input type="checkbox"/>
If yes, please describe your disability	
Do you have a learning difficulty?	Y <input type="checkbox"/> N <input type="checkbox"/>
If yes, please describe your learning difficulty	
Is there any other support that you will need to help you whilst at college?	

Equal Opps Monitoring (Please tick below the description that best describes your ethnicity):	
Asian or Asian British – Bangladeshi <input type="checkbox"/>	Mixed - White and Asian <input type="checkbox"/>
Asian or Asian British – Indian <input type="checkbox"/>	Mixed - White and Black African <input type="checkbox"/>
Asian or Asian British – Pakistani <input type="checkbox"/>	Mixed - White and Black Caribbean <input type="checkbox"/>
Asian or Asian British – Other <input type="checkbox"/>	Mixed – Other <input type="checkbox"/>
Black or Black British – African <input type="checkbox"/>	White – British <input type="checkbox"/>
Black or Black British – Caribbean <input type="checkbox"/>	White – Irish <input type="checkbox"/>
Black or Black British – Other <input type="checkbox"/>	White – Other <input type="checkbox"/>
Chinese <input type="checkbox"/>	Other <input type="checkbox"/>

Your Education	
Name of the Secondary School you attended	
Date of leaving	
If you are <u>not</u> a school leaver please explain what you have been doing during 2016-17 – we will also need a reference from your most recent tutor/employer	

Future aspirations (Please outline below any plans that you have for the future ie. career ideas, progression after college etc)

GCSE Results/Predicted results. If you have taken further study at college please also list your AS/A Level results or equivalent				
Course (GCSE, BTEC etc)	Subjects	Exam board (if known)	Year taken	Grade/Expected grade

Courses you wish to study at Ashton Sixth Form College	
Type of course (please tick) A-Level <input type="checkbox"/> Level 3 Extended Diploma <input type="checkbox"/> Level 2 Diploma <input type="checkbox"/>	List the course or subjects you wish to study below:

Data Protection act	
Information you provide on this application form will be stored and processed and because of the Data Protection Act 1998 we need your permission before we can do this. Since we cannot operate the college effectively without processing information about you, we need you to sign the statement below. Your information is stored on a secure system within the college and is not shared with any third parties.	
Your signature	