



## St Ivo Academy Sixth Form Application Form for Entry September 2021

Current St Ivo students:

you should make your application using this form, and complete the first page only and return to your form tutor.

External Applicants:

you should complete both sides of this form and return to Sixth Form Administrator, St Ivo Academy, High Leys, St Ives, Cambridgeshire PE27 6RR

### PERSONAL DETAILS

First name(s):	Home Tel:
Last name:	Mobile Tel:
Address:	Student email:
	Parent/Carer email:
	Date of birth:
Postcode:	Nationality:
Year 11 tutor group (if currently at St Ivo Academy)	Gender:

### SUBJECT CHOICES

You must refer to the entry pathways before making your choice.

A LEVELS		APPLIED LEVEL THREE		LEVEL TWO	
Art	German	Performing Arts (Dance)		Public Services	
Biology	History	Food Science & Nutrition		Sports Development	
Business Studies	Law	Health & Social Care (Single)			
Chemistry	Mathematics	Information Technology			
Drama & Theatre	Media Studies	Sport (Double)			
Economics	Music				
English Literature	Photography				
Extended Project Qualification	Physical Education				
Ethics, Philosophy & Theology	Physics				
Film Studies	Politics				
French	Product Design (Res Mat)				
Further Mathematics	Psychology				
Geography	Textiles/Fashion				
<p>You should choose at least 3 subjects. In addition, you may choose to study the EPQ. Maths/Science students may also choose Further Maths as a fourth subject.</p>				<p>You should choose 1 subject. you will also study GCSE English or Maths as appropriate and have the opportunity to do some work.</p>	

**Please note that whilst we endeavour to deliver a wide and varied range of courses every year, in the event of financial and/or staffing constraints, not every subject combination may be possible. Therefore, we would encourage you to choose two reserve subjects to avoid disappointment.**

### WHAT ARE YOUR CAREER PLANS/ INTENDED DESTINATION AFTER COMPLETEING SIXTH FORM?

### ANY OTHER INFORMATION

If you would like to give any further information that may help your application, use this space or attach an additional sheet.

### DATA PROTECTION

I agree that the information given on this form may be used for the required purposes 'under the terms of GDPR. I consent to the storage of the above information on manual and computerised files. Parents/carers, please also sign to confirm that you have discussed subject choices with your son/daughter.

Signature:	Parent/Carer Signature:	Tutor Signature:
Date:	Date:	Date:

**EDUCATION SCHOOL/COLLEGES YOU HAVE ATTENDED SINCE YOU WERE 11**

Name and address of school/college	From:	To:
Telephone No. of current school/college:		
Have you previously attended St Ivo School? YES <input type="checkbox"/> NO <input type="checkbox"/> Date:                      Year 11 Tutor:		
Have you applied to any other educational establishments or employer? YES <input type="checkbox"/> NO <input type="checkbox"/> If YES please state which. ( This will in no way effect our decision to offer you a place, but it will help us with our administration.)		

**QUALIFICATIONS AND AWARDS - YOU MAY INCLUDE RELEVANT AWARDS SUCH AS DUKE OF EDINBURGH**

Examination and level (e.g. GCSE Maths)	To be taken? (please tick)	Predicted Grade	Already taken (please tick)	Date taken	Final result

**LEARNING SUPPORT**

We are committed to helping our learners succeed and therefore wish to identify any support you may need at an early stage. Please advise us of any specific learning needs you have which may affect your study.  
Please tick any relevant boxes below.

Visual impairment	Autism Spectrum	Dyslexia	Dyspraxia
Severe learning difficulty	ADHD	Hearing impairment	Mental health
Dyscalcula	Speech impediment	Other, please state:	
Have you got a Statement of Education Needs? YES <input type="checkbox"/> NO <input type="checkbox"/> Date:			
Is English your first language? YES <input type="checkbox"/> NO <input type="checkbox"/> If NO what is your first language?			
<input type="checkbox"/> I would like a member of The Learning Support Team to be present at my interview to discuss any support needs, so that these can be put into place as soon as possible.			

**MEDICAL CONDITIONS**

If you have any disabilities or medical conditions we can contact you in confidence to discuss the support available. Please indicate medical conditions that we may need to be aware of. Please tick any relevant boxes below.

Anxiety/nervousness	Asthma or breathing difficulties	Diabetes
Temporary disability after illness	Migraines	Fainting
Skin allergies e.g. eczema	Disability affecting mobility	Difficulty standing/sitting
Working at heights	Epilepsy	Other physical disability
Other, please state:		

**Closing date for applications is Monday 25th January 2021**