



This form can be used to apply for full time courses at Excelsior College
 Please complete ALL sections in CAPITAL letters (using a black pen if not completed online).

1. Personal Details

Are you currently a pupil at Excelsior Academy?			<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
If YES, please tick of which school you are a member			<input type="checkbox"/>	Armstrong	<input type="checkbox"/>	Hadrian
			<input type="checkbox"/>	Jefferson	<input type="checkbox"/>	Milburn
Title:	First name(s):	Surname:				
Date of Birth:	Male: <input type="checkbox"/>	Female: <input type="checkbox"/>				
Nationality:			Country of normal residence:			
Address:			Have you been resident in the UK/EU for the past 3 years?			
Town/City:			<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Postcode:			If no, in what country/ies have you lived during this time?			
Telephone:						
Mobile:						
E-mail:						

2. School/College or Employer

Please indicate which school/college you are, or were, attending or your employer details:	
Name:	
Address:	

3. Course Choices

Please list course choices. You will need to select a minimum of three courses to be a full time student.

Course	Level	Order of Priority

If you need to speak to someone because you are undecided about the type of course and/or level to apply for please tick the box and we will contact you to arrange a Guidance Session.

4. Learning Support Requirements

We are committed to meeting the needs of people who are disabled or who have learning difficulties. Do you need any additional support with your learning whilst you are at the College?

YES NO

If YES, please state the type of support you may require e.g. Access Arrangements, specialist software etc.

5. Ethnic Origin

Which of the following would best describe your ethnic origin? Please tick as appropriate.

- 11 Asian or Asian British – Bangladeshi
- 12 Asian or Asian British – Indian
- 13 Asian or Asian British – Pakistani
- 14 Asian or Asian British – Any other Asian background
- 15 Black or Black British – African
- 16 Black or Black British – Caribbean
- 17 Black or Black British – Any other Black background
- 18 Chinese
- 19 Mixed – White and Asian
- 20 Mixed – White and Black African
- 21 Mixed – White and Black Caribbean
- 22 Mixed – Any other mixed background
- 23 White – British
- 24 White – Irish
- 25 White – Any other White background
- 98 any other
- 99 not known / not provided

6. Career Plans, other interests and experience

Career Aims:

Work experience/other activities/interests:

7. Qualifications

Please list ALL the examination subjects you have taken already or will have taken before the start of your course. Please include any predicted grades for any examinations with results pending.

Qualification e.g. GCSE/AS	Level	Subject/Course	Exam Board	Predicted Grade	Result Grade if Known	Month / Year taken

7. Data Protection Act 1998

Excelsior Academy and the Learning and Skills Council (LSC) are registered under the Data Protection Act 1998. The information you provide on this form will be passed to the LSC. Both Excelsior College and the LSC will collect and share the information with other organisations for the purpose of administration, careers and other guidance, statistical and research purposes. This will enable both Excelsior College and the LSC and its partners to monitor performance, improve quality and plan future provision. I agree to the processing and use of such data for any purpose connected with my studies or my health and safety or for any other legitimate reason. I have read and understood the conditions set out by the Data Protection Act Statement.

8. Signatures

Signature of Student _____ Date: _____

Signature of parent/carer (if under 18) _____

Print Name _____ Date: _____

Please return this form either by post to:

Mrs Deborah Goldfinch
Excelsior College Administrator
Excelsior Academy
Denton Road
Newcastle upon Tyne
NE15 6AF

or in hand to:

Mrs Deborah Goldfinch
Excelsior College

or electronically to:

6thform@excelsiornewcastle.org.uk