**INITIAL APPLICATION FORM FOR POST-16 STUDY FOR EXTERNAL APPLICANTS**

**PLEASE COMPLETE IN BLOCK CAPITALS**

**First Name of**

**Applicant:**

**Date of birth: (Required)**

**Parent/Guardian Name: Mr/Mrs/Miss/Ms**

**Home Address:**

**Surname of Applicant: Male or Female:**

 **Post Code:**

**Home No**

**Email Address:**

**Mobile No.**

 **School attended:**

**Attendance in Year**

**11:**

**Name of Head of Year:**

**Form:**

**Please return your completed application form to:**

**THE KINGSWOOD SECONDARY ACADEMY, GAINSBOROUGH ROAD, CORBY, NORTHANTS, NN18 9NS OR THE 6TH FORM OFFICE.**

 **FOR OFFICE USE ONLY:**

**Date application received:**

 **MEETING: YES NO**

 **OFFER: YES NO**

**OFFER LETTER SENT:**

**COMMENTS:**

**YES NO**

 **CONTINUED OVERLEAF**

**Fill in subjects currently studied and your predicted grades:**

**Subject Predicted**

**Grade**

**English**

**Mathematics**

**Science**

**Additional Subjects:**

**Subject Predicted**

**Grade**

**Subject Predicted**

 L2M

**Grade**

**Signature of Applicant:**

**Parental approval: I confirm that the information in this form is correct and I support the application.**

**Signature of Parent:**

**Please note – we will endeavour to offer all the courses listed in the prospectus, but this will be dependent on recruiting sufficient numbers for each course.**