**BRANSTON COMMUNITY ACADEMY**

**APPLICATION FOR SIXTH FORM SEPTEMBER 2025**

**Please complete fully in black ink and return to**

**your tutor by Friday 21st November 2025**

**NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FORM TUTOR: \_\_\_\_\_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **ADDRESS:** | **Home Tel. No:** |
| **e-mail address:** | **Student Mobile No:** |

|  |  |  |  |
| --- | --- | --- | --- |
| **YEAR 11 SUBJECTS TAKEN** | **TEACHER** | **EFFORT GRADES (From latest progress check)** | **ESTIMATED GRADES**  **(from latest progress check)** |
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| Career intentions: …………………………………………………………………………………….  ……………………………………………………………………………………………………………  ……………………………………………………………………………………………………………  …………………………………………………………………………………………………………… | | | |
| Please explain briefly why you would like to join Branston Sixth Form:  ……………………………………………………………………………………………………………….  ……………………………………………………………………………………………………………….  ……………………………………………………………………………………………………………….  ………………………………………………………………………………………………………………. | | | |

An electronic version of this form is available on the Academy website at www.branstonca.lincs.sch.uk

PROPOSED SIXTH FORM COURSES

**TWO YEAR ADVANCED COURSES**

After referring to the list of subjects available indicate below your choices, placing them IN RANK ORDER and obtain the signature of both the member of staff who teaches your GCSE/BTEC course (if appropriate) and the Head of Department. All students should choose **3** subjects and a reserve subject.

|  |  |  |
| --- | --- | --- |
| **SUBJECTS**  **(*In Rank Order*)** | **TEACHER’S SIGNATURE** | **HEAD OF DEPT SIGNATURE** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| Reserve |  |  |

**NB:** GCSE English and Mathematics courses will be included for those students who have not gained a 4 or above.

**APPLICANT’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_**

**PARENT’S APPROVAL:** I approve of my son/daughter entering the Sixth Form for 1 – 2 years.

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Parent/Guardian*

**NB:** If at any time after submitting your application you wish to review or change your options it is essential that you contact Mr Wilson immediately.

*For office use only*

**Form tutor review**

Please comment briefly on the applicant’s suitability for sixth form study.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Excellent | Good | Satisfactory | Unsatisfactory |
| Attendance |  |  |  |  |
| Punctuality |  |  |  |  |
| Work ethic |  |  |  |  |

Would you recommend this student for the sixth form (Please give details if necessary) ……………...

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Signed………………………………………