



School Record

In your present school are you involved in any of the following activities? Please provide details.

a) Clubs, societies, extra curricular activities

b) Sporting activities

c) Positions of responsibility

Other interests

Out of school how do you use your leisure time?

Proposed Courses at the College

Please list below any of the College courses you are interested in taking and would like to discuss at interview.

Name of Course and Level, for example (A, AS, GCSE)

Careers

It will help us to provide appropriate guidance over your programme of study at the College if you would indicate below any career interests you may have. For example, are you considering higher education and for what type of employment are you eventually aiming?



Supporting Students to Succeed

	Yes	No
Have you any medical condition or physical problems that may affect your learning? (for example asthma, diabetes, migraine, hearing problems)	<input type="checkbox"/>	<input type="checkbox"/>
Have you any learning difficulties that it would help us to know about? (for example dyslexia, dyspraxia, ADHD)	<input type="checkbox"/>	<input type="checkbox"/>
Have you had any extra help at school to pass your exams? (for example after school club, one to one help)	<input type="checkbox"/>	<input type="checkbox"/>
If you have answered yes to any of the above, please specify	<input type="checkbox"/>	<input type="checkbox"/>

Signature

Date

Please sign, date and print this form and return to:
The Registry
Barrow-in-Furness Sixth Form College,
Rating Lane
Barrow-in-Furness
Cumbria
LA13 9LE.