



# FLIXTON GIRLS SCHOOL SIXTH FORM APPLICATION FORM

## SECTION 1:

Please complete the form in **black ink & BLOCK CAPITALS**

Surname:		First Name:	
Date of Birth:			
Address:			
Postcode:		Home Tel:	
Mobile:		Email:	
School:			
Nationality:			

Have you lived in the UK or European Union for the last 3 years or more?    Yes     No

Personal Identity – How would you describe your ethnic origin or personal identity?

White	Mixed/multiple ethnic group	Asian/ Asian British	Black/ African/ Caribbean/ Black British	Other ethnic group
English/Welsh/Scottish <input type="checkbox"/>	White & Black Caribbean <input type="checkbox"/>	Indian <input type="checkbox"/>	African <input type="checkbox"/>	Arab <input type="checkbox"/>
Northern Irish/ British <input type="checkbox"/>	White & Black African <input type="checkbox"/>	Pakistani <input type="checkbox"/>	Caribbean <input type="checkbox"/>	Any other ethnic group <input type="checkbox"/>
Irish <input type="checkbox"/>	White & Asian <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>	Any other Black / African/ Caribbean background <input type="checkbox"/>	
Gypsy or Irish Traveller <input type="checkbox"/>	Any other mixed/multiple ethnic background <input type="checkbox"/>	Chinese <input type="checkbox"/>		
Any other white background <input type="checkbox"/>		Any other Asian background <input type="checkbox"/>		

## SECTION 2:

Please indicate which A Level subjects you want to apply for

Art <input type="checkbox"/>	English Literature <input type="checkbox"/>	Philosophy <input type="checkbox"/>
Biology <input type="checkbox"/>	Geography <input type="checkbox"/>	Photography <input type="checkbox"/>
Business <input type="checkbox"/>	BTEC Health and Social Care <input type="checkbox"/>	Politics <input type="checkbox"/>
Chemistry <input type="checkbox"/>	History <input type="checkbox"/>	Psychology <input type="checkbox"/>
DT: Product Design <input type="checkbox"/>	Mathematics <input type="checkbox"/>	BTEC Sport <input type="checkbox"/>
English Language <input type="checkbox"/>	Media <input type="checkbox"/>	Sociology <input type="checkbox"/>

Signature	Date:
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**SECTION 3:**

Tell us more about yourself, why would you like to attend FGS Sixth Form, why you have chosen this course, any relevant work experience, part time employment, hobbies or achievements


**SECTION 4:**

**Examination Results**

In order for us to process your application form you will need to state your predicted grades

Subject	Level e.g. GCSE	Grade	Year of Exam

**SECTION 5:**

Do you have any disability or learning difficulty requiring special consideration or support?      Yes       No

Are you currently in receipt of any additional support at school?      Yes       No       If Yes please give details below


Please note Section 6 is optional for your teacher to complete

**SECTION 6:**

Please provide any information that will help support this student in their application and interview


Name (please print):	Position:	
Contact Tel:	Signature:	Date:
Email:		

**Please return to the main school office**  
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T: 0161 912 2949 M: 07572 031306 F: 0161 747 9834 E: nmckenna@flictongirls.com