



Liverpool College

Application for Sixth Form September 2018

Pupil's details	
Surname:	
Forename(s):	
Date of birth:	/ / Gender: Male Female (please circle)
Current School	

Parent or Guardian details	
Surname:	
Forename(s):	
Title (Mr/Mrs/Ms/Dr etc.):	
Address:	
	Postcode:
Telephone numbers	Home:
	Work:
	Mobile:
Email address:	
Relationship to Child: (please tick appropriate box)	<input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian

Are you employed by Liverpool College and have been employed continuously by the College for 2 years or more?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Siblings at Liverpool College
Please give the name(s) of any sibling(s)* who will be pupils at Liverpool College in Years Reception to Year 13 on the date of admission.

About your child		
Is the child a Looked After Child in the care of the Local Authority or been previously 'looked after' and has now been adopted by you (or become subject to a residence order or special guardianship order)?	Yes <i>(Please provide evidence)</i>	No
Does your child have a statement of special educational needs (SEN) or Education, Health and Care (EHC) plan that names Liverpool College	Yes	No

SUBJECT CHOICES

A Level options will be decided by November 2017 and will be published on our website. Further information will also be available at our Sixth Form Open Events which will be held on :

Wednesday 8th November and Wednesday 10th January.

Declaration	
I declare the information on this application form to be true and correct and agree that it can be subject to verification.	
Signed (Parent / Guardian): _____	Date: _____
OR	
Signed (Student): _____	Date: _____

**Please return this form to Sixth Form Admissions, Liverpool College, Queens Drive,
Liverpool, L18 8BG BY 23rd FEBRUARY 2018**