

Saltash Community School

External Application for TEAM Sixth Form September 2022



APPLICANT INFORMATION:			
LAST NAME:		GENDER ASSIGNED AT BIRTH:	
		GENDER IDENTITY IF DIFFERENT FROM THAT ASSIGNED AT BIRTH:	
FORENAME(S):		DATE OF BIRTH:	
ADDRESS:			
CURRENT SCHOOL:		EMAIL ADDRESS:	
MAIN CARER'S NAME:			
MAIN CARER'S HOME CONTACT NUMBER:		MAIN CARER'S MOBILE NUMBER:	
MAIN CARER'S EMAIL ADDRESS:			
APPLICANT'S ETHNIC INFORMATION (please tick). This is used for statistical purposes only.			
White - British	<input type="checkbox"/>	Any other mixed background	<input type="checkbox"/>
White - Other	<input type="checkbox"/>	Asian – Indian	<input type="checkbox"/>
White and Black Caribbean	<input type="checkbox"/>	Asian – Pakistani	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>	Asian – Bangladeshi	Any other Ethnic Group, please specify
White and Asian	<input type="checkbox"/>	Asian – Other	
The following information does not affect the status of this application but used to ensure that support can be provided where appropriate during induction and beyond.			
Is English the language most spoken at home?			Yes / No
Does the applicant have an Educational Health Care Plan (EHC)? (please provide details)			Yes / No
Does the applicant you have a disability? (please provide details)			Yes / No
Does the applicant have learning support or additional time in exams? (please provide details)			Yes / No
Has the applicant been eligible to claim for free school meals during the last 6 years?			Yes / No
Is/has the applicant ever been a looked after child? (in care, adopted from care, under guardianship or residence order)			Yes / No
Is one/both of the applicant's main carer(s) currently serving in the Armed Forces?			Yes / No

