

Cardiff Academy - Sixth Form College

Scholarship Application Form



Personal Details - please complete the application form below in BLOCK CAPITALS

First name: _____ Middle name: _____ Surname: _____

Preferred name: _____ Date of birth: _____ Age: _____ Female Male (Please tick)

Home tel: _____ Student mobile: _____

Student email:

Nationality: _____ Country of normal residence: _____ Resident in the UK/EU for the past 3 years? Yes No

Address: _____

Postcode: _____

Details of Parents or Guardians

Father's or Guardian's title: Mr Other First name: _____ Surname: _____

Contact nos. Home tel: _____ Mobile: _____

Address (if different from student): _____

Postcode: _____

Father's or Guardian's email:

Mother's or Guardian's title: Ms Mrs Miss Other First name: _____ Surname: _____

Contact nos. Home tel: _____ Mobile: _____

Address (if different from student): _____

Postcode: _____

Mother's or Guardian's email:

Correspondence should be addressed to (please tick box as appropriate)

Parents/Guardians Mother or Guardian only Father or Guardian only Names of other people authorised for information:

Present or most recent school

Present/previous school/college name: _____

Date started: _____ Date left or due to leave: _____

School address: _____ Postcode: _____

Qualifications

| Type of course - GCSE, BTEC etc | Subject/course currently studying/or have previously studied | Predicted grade | Grade (if known) | Month / year taken |
|---------------------------------|--|-----------------|------------------|--------------------|
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The three subjects requested to study at College (in order of preference). Only add a fourth if required.

1. _____ 2. _____ 3. _____ 4. _____

Career plans, other interests and experience

Career / University aims:

Work experience:

Hobbies, interests and other achievements:

What are your favourite subjects?

Do you prefer coursework/exams/both?

Please detail your reasons for choosing Cardiff Academy:

Applications to other colleges

Are you applying for a place at another college, school, training or full-time employment? If yes please state which:

Disability/Learning difficulty:

The College is committed to meeting the needs of people who are disabled or who have learning difficulties. Specialist staff and facilities are available for all students to ensure that individual needs are catered for. Individual requirements can be discussed at interview, however if you would like to discuss these earlier, please do not hesitate to contact the Admissions Office.

Student declaration:

Cardiff Academy and the Education Funding Agency (EFA) are registered under the Data Protection Act 1998. The information you provide on this form will be passed to the EFA to meet legal responsibilities under the Apprenticeships, Skills, Children and Learning Act 2009, and for the Agency's Learning Records Service (LRS) to create and maintain a unique learner number (ULN). Both Cardiff Academy and the EFA will collect and share the information with other organisations for the purpose of administration, careers and other guidance, statistical and research purposes. This will enable both Cardiff Academy and the EFA and its partners to monitor performance, improve quality and plan future provision. I agree to the processing and use of such data for any purpose connected with my studies or my health and safety or for any other legitimate reason. I have read and understood the conditions set out by the Data Protection Act Statement.

Please sign

Signature of Applicant:

Date:

Signature of Parent /
Guardian / Carer:

Date:

Return to: Cardiff Academy, 40-41, The Parade, Cardiff, CF24 3AB

tel: +44 (0) 2920 409 630 | www.cardiffacademy.co.uk | email: admissions@cardiffacademy.co.uk

Return form with:

Enclosed relevant academic transcripts

Enclosed Copy of Passport

FOR OFFICE USE ONLY:

Interview notes and specific
educational requirements

School report seen?

Careers advice given?

Unconditional
offer:

Probationary
offer:

Interviewer's
initials:

Date:

Subjects

1

2

3

4

Entered: