

## HEALTH FUTURES UTC YEAR 12 APPLICATION FORM FOR SEPTEMBER 2019

### STUDENT PERSONAL DETAILS

First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Gender:  Male  Female

Current Address: \_\_\_\_\_

\_\_\_\_\_

Town/City: \_\_\_\_\_

Postcode: \_\_\_\_\_

Borough: \_\_\_\_\_

### EDUCATION DETAILS

Current School: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Borough: \_\_\_\_\_

Head Teacher: \_\_\_\_\_

Current Year Group: \_\_\_\_\_

**Subjects currently studying and predicted GCSE results:**

**Examinations already taken and results if applicable:**

**Do you have any particular career ambitions?**

**Why would you like to attend Health Futures UTC?**

**Any Special Education Needs/Other Information:**

**Please tell us a little about your hobbies and interests (any voluntary/work experience if applicable).**

If you are predicted to achieve five grade 4s at GCSE, including English and maths, please select four subjects from the following list to study (you must check the entry criteria for each subject):

<b>Biology</b>	<b>Applied Science</b>	<b>Maths</b>
<b>Chemistry</b>	<b>Physics</b>	<b>English Literature</b>
<b>Psychology</b>	<b>Sociology</b>	<b>Childcare</b>
<b>Business Studies</b>	<b>PE</b>	<b>IT</b>
<b>Health and Social Care Single Award</b>	<b>Health and Social Care Double Award</b>	<b>Health and Social Care Triple Award</b>

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

If there is another subject, or subjects, that you would like to study that is not on the list please give details below:

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If you are not expecting to achieve five GCSEs at grade 4 or above including English and maths you may be eligible for our foundation programme. Please tick below:

I am interested in applying for the foundation programme:

## PARENT/GUARDIAN DETAILS

Title: \_\_\_\_\_

Title: \_\_\_\_\_

First Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Parent email address (1): \_\_\_\_\_

Parent email address (2): \_\_\_\_\_

Home telephone number: \_\_\_\_\_

Mobile number(s): \_\_\_\_\_

How did you hear about the UTC? \_\_\_\_\_

## DECLARATION AND SIGNATURE OF PARENT/GUARDIAN

- I confirm that I authorise Health Futures UTC to process my child's application
- I understand that this will involve contact with their existing school, and give permission to share the appropriate information to facilitate my son/daughter's transfer

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_