Application for Admission September 2021



The closing date for applications is 8th January 2021

Please use BLOCK CAPITALS and a black pen to complete this form neatly

Personal Details

Please giv	e your fu	ıll nam	e as s	hown	on yo	ur birt	h certi	ficate c	r passp	oort					
orename:															
urname:															
ate of Birth:	D	D	М	М	Y	Y		ge on 1	st Sept	ember :	2021:				
									М	ale:			Fem	ale:	
Address:															
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Postcode:				Hon	ne Pho	ne N	umbei	r:							••••
Your mobile	number	r:				Y	our er	nail ad	dress:						
Religion:					Catl	nolic F	Parish:								
Non-Catholic	students	shoul	d indi	cate t	heir ch	urch r	nembe	ership, i	f any:						
Have you live	ed in the l	JK and	l/or tl	ne EU	for the	last 3	years	?	Yes:		No:				
If you were n	ot born ir	n the U	JK/EU	wher	did vo	ou con	ne to li	ve here	· · · · · · · · ·						
Nationality					-										
· ·						•	•••								
	Educa	ition													
Please list a	ll the sch	nools/	colle	ges yo	u hav	e atte	nded:								
											Date	from	:	D	ate to
Primary sch	ools:										/				/
Secondary schools:							/			/					
Colleges:							/	/			/				
Please list th	ie subject	ts you	woul	ld like	to stu	dy and	d the o	qualific	ation (A Leve	l, BTEC	C, GCSI	E etc):		
Please list the subjects you would like to study and the qualification (A Le Subject/Course:						ı	Qualification:								
-															

What career are you considering?.....

Education continued Other applications: If you are applying elsewhere, please list the colleges (including Loreto) in order of preference: First choice: Second choice: Third choice Your support Loreto College is committed to ensuring that students with learning difficulties and disabilities are treated fairly. In order to ensure that appropriate support can be offered by the College, we would be grateful if you could answer the following questions. Do you have a disability, learning difficulty or medical condition? Yes. No: If yes please give details below Visual Impairment Moderate Learning Difficulty Other Physical Disability **Hearing Impairment** Severe Learning Difficulty Other Learning Difficulty Disability affecting mobility Dyslexia Other Medical Condition **Profound Complex Disabilities** Dyscalculia Temporary Disability after illness Social/Emotional Difficulties Other Disability Autism Spectrum Disorder Mental Health Difficulty Asperger Syndrome Prefer not to say If you have ticked one of the boxes above please give full details of your disability/learning difficulty or medical condition: Residency Residency - If you were NOT born in the UK or EU please indicate your current residential status in the UK: British/EU Citizen: Asylum Seeker: Refugee: Indefinite/limited leave to remain: **Emergency Contact/Next of Kin Details** For correspondence please give your parent's/carer's title and surname below: Surname: Title: Relationship of above person to you: Their phone number for emergency contact: Parent's/carer's address (if different to yours): Ethnicity Loreto is required by the funding bodies to return the ethnic origin for each student as part of the Individual Learner Record return. The information will be used as statistical data only and will be treated in confidence. Please tick appropriate box below.

35. White & Black Caribbean 🗖 39. Indian 🗖 44. African 🗖 31. English/Welsh/Scottish/ Northern Irish/British 🗖 36. White & Black African 🗖 40. Pakistani 🗖 45. Caribbean 🗖 32. Irish 🗖 33. Gypsy or Irish Traveller 🗖 37. White & Asian 🗖 41. Bangladeshi 🗖 46. Any other Black/African/Caribbean □ 34. Any other white background 🗖 38. Any other mixed/multiple \Box 42. Chinese 47. Arab 🗖 ethnic background 43. Any other Asian $\ \square$ 98. Any other ethnic group \Box

Examina	tions				
		ns you have already tak t or estimated grade col			•
Date of Examination (e.g. 06/21)	Board	Subject	Qualification (e.g. GCSE/BTEC/ A Level)	Level (Single/Double)	Grade (result or estimate)
lease attach a copy of yo	our certificat	es or statement of results fo	r any exams you have alre	ady taken.	
General Info	ormation				
eneral interests: (co	ntinue ont	o a separate sheet of pa	aper if needed):		
oort: Are you curren	tly involve	d in sport? Please give o	details:		
		strument? What instrun		Vhat grades h	ave you
ease detail any wor	k experien	ce or any part time wor	k etc		
	-	ember please give detai			
any of your siblings	have atter	nded Loreto, please give	their names & date c	of leaving belo)W:
o you live independ	·		lo:		.
lease give reasons fo	or choosing	g Loreto College (contin	ue onto a separate sh	eet of paper i	t needed):
preto College collects informat	ion for all stude	ents, their parents/carers and staff f	or various administrative. acade:	mic, and health & sa	fety reasons. Because

of the General Data Protection Regulation and the Data Protection Act 2018, we need your consent before we can do this. Since we cannot operate the College's admissions procedure effectively without processing information about you, we need you to sign the following consent to process clause. If you require any further information about this, please contact the Student Admissions Office.

I agree to Loreto College processing personal data contained in this form or other data which the College may obtain from me or other people whilst I am a student at the College. I agree to the processing of such data for any purposes connected with me or my studies or my health and safety whilst on the premises or for any other legitimate reason. I agree that the information on this application form is true and correct.

Signed by applicant:	Date:	
Signed by applicant's parent/carer:	Date:	

Confidential reference to be completed by the school

PLEASE COMPLETE THE ESTIMATED GRADE/RESULT SECTION UNDER 'EXAMINATIONS'										
	% if	٧	Good	Fair	Poor	Comment				
	nown	Good							1	
ATTENDANCE:										
PUNCTUALITY:]	
CONDUCT:]	
APPLICATION:]	
Have you complete	d or cho	akad tha a	stimated							
Have you completed grades in the Exami			sumated		Yes:		No:			
Is the applicant's cl	hoice ap	propriate	?		Yes:		No:			
Has the applicant ever had a statement of										
SEND or do they have	ve an EH	IC Plan? (if	yes		Yes:		No:			
please give details b	pelow)									
Are there any aspect	s of the	applicant's	health							
which you feel shoul				Yes:		No:				
tion? (if yes please g	ive detai	ls below)		163.		140.				
									••••	
Is the applicant a Lo	oked Af	ter Child?			Yes:		No:			
Do you need to disc	uss anv	matters in	1							
confidence with the an email address)	=			Yes:		No:				
Please give any additional information which you feel may be helpful in considering this application and proposed course:										
Name of referee:					Job Title:					
Signature:						Date:				
It is a condition of admission the right to withdraw an offe applicant in support of their statutory, safeguarding or co For office use only:	er of a place	or terminate was inaccurat	the registration e. Also, should r	of a student s natters come	hould it subse to light that w	equently con vould be dee	ne to light that the inforr med contrary to the Coll	mation provided b	y an	

Date Received:

Hall:

Level: