

FRIENDS' SCHOOL LISBURN

SIXTH FORM – APPLICATION FORM FOR ENTRY SEPTEMBER 2025

Full Name					
(Chosen first name underlined					
Address					
Tel Number (Mobile)					
Email Address					<u>-</u>
Present School					
GCSEs Plea	ase give full	details belov	v of GCSE subjects cur	rently studied.	
Subject	Tier	Full or Short Course F/S	Board	Mock Exam Result	Anticipated GCSE Grade
Provisional AS/A Level Subjec	ct Choices		1		
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			_		_
			4		_

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Please use the spaces below to complete the following details.

Posts of Responsibility Held (inside and outside School)
Interests and Activities (inside and outside School)
Career Plan – What do you wish to do after School?
Reasons for wishing to join the Sixth Form at Friends' School
At your current school have you a statement of SEN and/or any Learning Difficulties (e.g. consultation wit Educational Psychologist, Learning Support in Primary School, Access arrangements for GCSEs etc).
No Yes (please specify)
At your current school have you any pastoral issues or concerns (including Child Protection & Safeguardin which you feel we should be aware of?
No Yes (please specify)
Signature Date