

FRIENDS' SCHOOL LISBURN

SIXTH FORM – APPLICATION FORM FOR ENTRY SEPTEMBER 2026

Full Name					
(Chosen first name underli	ned)				
Address					
Tel Number (Mobile)	(Home)				
Email Address					
Present School					
			f GCSE subjects cu		
Subject	Tier	Full or Short	Board	Mock Exam Result	Anticipated GCSE Grade
		Course			
		F/S			
Provisional AS/A Level Sub	ject Choices		1		
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			3		_
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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 with 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 & Safeguarding) which you feel we should be aware of? (please specify) _____ No Yes Please enclose a copy of a latest School Report here Signature _____ Date _____

Please complete the following details: