

Application form 2017-18

For admission in September 2017



For office use only: OS IL BH DOB Query

Student ID: ULN:

DEADLINE FOR PRIORITY APPLICATIONS: 31 March 2017

Please return form to: Advice and recruitment, NewVic, Prince Regent Lane, London E13 8SG
Tel: 020 7473 4110 | F: 020 7511 9463 | www.newvic.ac.uk | fb.me/newhamsix | @talknewvic

PLEASE COMPLETE CLEARLY IN **CAPITAL LETTERS** in blue/black ink

1. Personal details

Have you previously studied at NewVic? Yes No Have you previously applied to NewVic? Yes No

First name(s): _____ Address: _____

Family/last name: _____

Gender: Male Female

Date of birth: dd / mm / yyyy _____

Age on 31 August 2017: _____ Postcode: _____

Nationality: _____ How long have you lived at this address? _____

Home borough: _____

Mobile number: _____ Home telephone number: _____

Email address: _____

(please provide an email address, as we will use this in all future correspondence with you)

Have you been a permanent resident in the UK/EU for the past three years? Yes No

(If no, please provide a photocopy of your passport/visa with your application)

Which languages do you speak at home? English Other (please state) _____

NewVic is committed to equality of opportunity and values diversity. This information will be used for monitoring purposes only and will be treated as confidential. Please tick one of the boxes below to indicate your ethnic background.

- | | | | |
|--|---|--|--|
| Asian/Asian British: | Black/African/Caribbean/
Black British: | Mixed/Multiple/other ethnic groups: | White: |
| <input type="checkbox"/> Indian | <input type="checkbox"/> African | <input type="checkbox"/> White and Black Caribbean | <input type="checkbox"/> White British |
| <input type="checkbox"/> Pakistani | <input type="checkbox"/> Caribbean | <input type="checkbox"/> White and Black African | <input type="checkbox"/> White Irish |
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Any other Black/African/
Caribbean background | <input type="checkbox"/> White and Asian | <input type="checkbox"/> Gypsy or Irish Traveller |
| <input type="checkbox"/> Chinese | | <input type="checkbox"/> Any other Mixed/multiple
ethnic background | <input type="checkbox"/> Any other White
background |
| <input type="checkbox"/> Any other Asian
background | | <input type="checkbox"/> Arab | |
| | | <input type="checkbox"/> Any other ethnic group | |

2. Parent/guardian details

Enter address if different from student address

First name(s): _____ Address: _____

Family/last name: _____

Home telephone number: _____

Mobile number: _____ Postcode: _____

Email: _____

Gender: Male Female Relationship to you: _____

Emergency contact details (if different from above)

Please tick this box if emergency contact is same as parent/guardian contact details

If not the same please complete below:

Contact name: _____ Contact number: _____

5. Tell us about yourself

I want to study this course at NewVIc because _____

My greatest achievements to date are _____

What university degree course are you considering, if any? (eg: degree in mathematics)

What career path are you considering? (eg: engineering)

6. Sports Academy

Tick below if you are interested in being part of any of these Sports Academies.

Basketball Cricket Sports leadership

7. Student details

We want all of our students to succeed at NewVIc and we can provide a wide range of support. We will discuss your support needs confidentially with you at your interview. The first step is to tell us what support you currently receive at school.

Do you have support needs? Yes No (if yes, please tick the relevant boxes)

- | | |
|---|---|
| <input type="checkbox"/> I have a physical disability | <input type="checkbox"/> I have visual/hearing impairment |
| <input type="checkbox"/> I have a learning need or disability | <input type="checkbox"/> I have personal/emotional needs |
| <input type="checkbox"/> I have literacy/numeracy support | <input type="checkbox"/> I have had access arrangements for exams |
| <input type="checkbox"/> I have a medical condition | <input type="checkbox"/> I have other support needs |

8. Statement of application

Please read the following statement and sign below. This will help us to process your application more quickly.

I wish to apply for admission to the full-time course indicated in the PREFERRED PROGRAMME OF STUDY section. If offered a place at the college, I agree to comply with the general regulations and any particular conditions set out in the offer.

I certify that the information given is correct to the best of my knowledge.

Student signature: _____ Date: _____

Please now give this form to your school/college to complete the reference below.

9. School/college reference

This reference section must be completed by your tutor or head of year at your current school or college before the application form is sent to NewVIC.

Name of student: _____

This is an open reference and will be discussed with students at interview to review their current performance and to guide their final choices at enrolment.

Please tick the relevant box

	Excellent	Good	Fair	Poor	%
Attendance (please give the % as well as ticking the appropriate box)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Punctuality (please give the % as well as ticking the appropriate box)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Attitude to study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cooperation with staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Relationships with other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Are there any extenuating circumstances to explain any of the judgements above?

Has the student been involved in serious misconduct in the last two years? Yes No

Please provide information about the misconduct, including any improvement in behaviour and conduct since the incident (please attach a full report of the incident on a separate sheet, signed and stamped):

Is the student a member of the gifted and talented (G&T) group? Yes No

If yes, please give details of the G&T areas: _____

10. Learning needs

Please tick any of the categories of support that might be necessary for this student and provide further information where needed.

- | | | |
|--|--|---|
| <input type="checkbox"/> Literacy | <input type="checkbox"/> Numeracy | <input type="checkbox"/> EAL (English spoken as an additional language) |
| <input type="checkbox"/> Learning need or disability | <input type="checkbox"/> Physical disability | <input type="checkbox"/> Visual/hearing impairment |
| <input type="checkbox"/> Medical condition | <input type="checkbox"/> Personal/emotional | <input type="checkbox"/> Exam access arrangements |

Does the student hold an EHCP (Education Health and Care Plan) or S139a? Yes No

If yes, please attach a copy of the statement to this form, along with copies of any other documentation such as specialist reports etc.

Is the student known to the young people and children services? Yes No

If yes, which local authority? _____

Does the student live independently? Yes No Is the student a care leaver? Yes No

Name of referee: _____

School/college: _____

Email address: _____

Referee signature: _____

Position: _____

Date: _____ Telephone: _____

Thank you for your help.

School/college stamp:

If you have any queries, please contact the advice and recruitment team, email advice@newvic.ac.uk or call 020 7473 4110 (please choose option 3 for student admissions).