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| **Nissan Academy APPLICATION FORM** |
| **Student Personal Details** |
| **[ ]  Male** **[ ]  Female**  |
| Forenames |  |
| Surname |  |
| Date of Birth |  | Age |  |
| Address |  |
| Postcode |  |
| Telephone |  |
| Email |  |
|  |
| **Parent/Guardian Details** |
| Title | Mr **[ ]**  Ms **[ ]** Mrs **[ ]**  Dr **[ ]**  Other: (please state) |
| Forenames |  |
| Surname |  |
| AddressIf different to the student's address |  |
| Postcode |  |
| Telephone Home |  | Telephone Work |  |
| Mobile |  | Email |  |
| Please indicate your relationship to the child | Mother **[ ]**  Father **[ ]**  Step-parent **[ ]**  Carer **[ ]**  Other **[ ]**  Social Worker **[ ]** Please state if answered other  |
| **Personal Statement** |
| This must be completed by the prospective student. Please give information on why you would be successful at the GTA or The Nissan Academy. (no more than 500 words). |   |
| **Personal Information** |
| Has your child ever been excluded from school? | Yes **[ ]** No **[ ]**  |
| Has your child ever been permanently excluded? | Yes **[ ]** No **[ ]**  |
| Does your child need extra support to help them succeed? | Yes **[ ]** No **[ ]**  |
| Does your child have a statement of Special Educational Needs? | Yes **[ ]** No **[ ]**  |
| If yes, please advise on date of statement. |  |
| Are Social Services involved with your child? | Yes **[ ]** No **[ ]**  |
| If yes, what is the Social worker’s name? |  |
| Are Educational Welfare currently involved with your child? | Yes **[ ]** No **[ ]**  |
| If yes, what is the Educational Welfare officer’s name? |  |
| Are there any other agencies involved with your child? | Yes **[ ]** No **[ ]**  |
| If yes, what agency? |  |
| Is there anyone who should not have access to information about this child? | Yes **[ ]** No **[ ]**  |