Application for Admission to Immanuel College 2020-2021



Other Names:
D of D
D of B:
Form Group:
(mobile):
Target Grades

Hobbies/Interests/Extra-curricular activities:		
Work Experience:		
Please give details of any Health Issues or SEN:		
Have you ever been excluded from school If Yes, please give details:	Yes/No	
Are you applying to alternative further education colleges? If yes, please give details:	Yes/No	
Signature of Student:	Date:	
Name of Parent/Carer: Mr/Mrs/Ms: (In block capitals please)		
Signature of Parent/Carer:	Date:	

Please return the completed application form to Mrs Sutcliffe (Post 16 Office)















