



## Educational Information

Present School:

Address:

Name of Head Teacher:

Name of current Head of Year:

School Telephone Number:

School Email Address:

## Additional Information

Please circle applicable:

Do you have any special educational needs?

If YES, please give details on a separate sheet. This will be discussed if you are invited to a workshop.

YES/NO

Do you have an Educational Health Care Plan?

This will be discussed if you are invited to a workshop (please enclose a copy of your EHCP).

YES/NO

Do you have any health issues we should know about for your comfort and safety?

If YES, please attach details.

YES/NO

## Signatures

Applicant's signature

Date

Parent/Guardian signature

Date

## Checklist for applicants

Please check the following to ensure you have completed the form correctly.

Your application will not be processed without this information:

- I have attached two passport sized photographs
- I enclose a photocopies (not original) of all of my Year 7 and Year 8 reports
- I enclose a copy of my full end of Year 7 and Year 8 attendance and punctuality breakdown. The full attendance *Registration Certificate*.
- I have completed every section of the form and it has been signed by me and my parent/carer

Please return your application form before 31st January 2019.

To: Student Applications, Birmingham Ormiston Academy, 1 Grosvenor Street, Birmingham, B4 7QD.

**Please ensure the correct postage is applied to your application. Please get the envelope weighed at the Post Office.**





Birmingham Ormiston Academy  
**imagine everything**

## Monitoring Survey

Surname:

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Forename:

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Please tick appropriate box:

<b>White</b>	<input type="checkbox"/> British	<input type="checkbox"/> Irish	<input type="checkbox"/> Gypsy/Roma	<input type="checkbox"/> Any other white background
<b>Mixed</b>	<input type="checkbox"/> White and Black Caribbean	<input type="checkbox"/> White and Black African	<input type="checkbox"/> White and Asian	<input type="checkbox"/> Any other mixed background
<b>Asian</b>	<input type="checkbox"/> Indian	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Any other Asian background
<b>Black/Black British</b>	<input type="checkbox"/> Caribbean	<input type="checkbox"/> African	<input type="checkbox"/> Any other Black background	
<b>Chinese</b>	<input type="checkbox"/>			

Any other Ethnic Background (please specify):

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Is English your first language? YES/NO

If NO, please indicate first language:

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Please return your application form and all documentation before 31st January 2020.

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