## **Exmouth Community College** Post 16 Application Form (External Student)



**Personal Details** 

Please complete this form in full (the form on the

reverse is for the use of College staff only).

Submit this form as soon as possible to: The Post 16 Office, Exmouth Community College, Gipsy Lane, Exmouth, Devon, EX8 3AF.

Copies of this form can be printed from our website or obtained from the above address.

To contact us	10	COI	าเลษเ	us.
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To contact us:	Name:			
Telephone: 01395 255660 <b>or</b>	Current			
Email:	Address	s: Number:		
lara.perryman@exmouthcollege.devon.sch.uk		ne Number:		
Personal Profile	Email:			
Discourse for the state of the	Date of	Birth:		
Please list any: Interests, clubs, activities: both inside and outside College. Include work experience placements	Acaden	nic Profile		
piacements	UCI Exa	amination Number:		
	Public E	xamination Grades		
	Level	Subject	Predicted	Actual
Future Career Interests				
Disability (Optional)				
Disability (Optional) – Please give any information you feel we should know				
Proposed Programme of Study				
Troposca Frogramme of Octaay				
	Other C	ualifications		

## Post 16 Coursing Record (for office use only)

Name:

Curr	ent School:					
UCI	Examination Number:					
Pro	gramme of Study – MUST be without	clashes and meet entrance	requir	ements		
Lev	vel 3 Advanced Courses					
	Subject Title	Option Block	Cour	se Code	Grade R	equired
1						
2						
3						
4						
5						
Lev	vel 2 Advanced Access Programme (S	Subject Specialism BTEC Di	ploma	)		
1						
Pre	ferred courses which clash			Optio	on Block (	Clashes
Dre	formed courses for which presently up	aqualified				
Pre	f <mark>erred courses for which presently ur</mark>	nquamed				
Re	cord of Interviews			Name of (	Courser	Date