SULLIVAN UPPER SCHOOL
HOLYWOOD

APPLICATION FOR ADMISSION TO THE SECONDARY DEPARTMENT:

KEY STAGE 4

This form is to be used by the parents of pupils who wish to be considered for admission to **Year 11** (or in exceptional circumstances to Year 12) and should be completed and returned on or before **31 May** in the appropriate year.

NAME OF PUPIL _____

FOR OFFICE USE ONLY

YEAR 11 ☐

YEAR 12 ☐

Date application received: _____

Please complete the following sections legibly in black ink or typescript and provide all the information requested.

SECTION 1: BASIC INFORMATION

a) *Surname* _____ *Male* ☐ *Female* ☐

Forename (s) _____

b) *Date of Birth (dd/mm/yyyy)* _____ c) *Place of Birth* _____

d) *Address (ie normal place of residence)*

Street _____

Town _____

Post Code _____

e) *Contact Telephone Numbers*

(Home) _____ *(Mobile)* _____

f) *Contact Email Address* _____

g) *Name, address and phone number of current school*

Name _____

Address _____ *Phone* _____

Town _____

Postcode _____

Current Year Group	_____

h) *Name(s) of school(s) previously attended, with dates.*

Name(s)	*Year/Month From*	*Year/Month To*

This school may wish to contact the school which the applicant currently attends or the school(s) previously attended (or both) and seek a report indicating the applicant's academic record as well as his or her personal record.

SECTION 2: ADMISSIONS CRITERIA

(a) ACADEMIC RECORD *[This category will receive greater weighting.]*

The academic record of the applicant must indicate that he/she would be likely to be able to deal successfully with the courses of study provided by the school.

Careful attention will be given to reports provided by the applicant's current school. The school will also consider any accredited assessments (including Transfer tests) provided with the application.

Were the NI Transfer Tests (including either AQE or GL Assessment) taken? YES ☐ NO ☐

*If **yes**: Date test taken* _____ *Score/Grade obtained* _____

*If **no**: Was any separate assessment completed?* YES ☐ NO ☐

*If **yes**: Please attach the results of any assessment taken.* YES ☐ NO ☐

Please attach the results of any other public examinations taken. YES ☐ NO ☐

*Please **attach a copy of the most recent report** from the school currently attended.* YES ☐ NO ☐

(b) PERSONAL RECORD

Applicants should provide evidence, such as a letter from their Principal, that they have a satisfactory record in terms of attendance, punctuality, behaviour. YES ☐ NO ☐

(c) EXISTING LINKS

The school will take into account any link with the school and, in particular, whether the applicant has a brother or sister currently in attendance at the school. YES ☐ NO ☐

Sibling _____ *Class* _____
Sibling _____ *Class* _____
Sibling _____ *Class* _____

Other family connection(s)

Other information

(d) HOME ADDRESS

The school will normally consider for admission only those applicants whose normal place of residence is (or will be at the time of enrolment in the school) within the school's usual catchment area.

Postcode _____

Other Information

(e) ***PARTICULAR TALENTS OR APTITUDES***

The school will give careful consideration to any special talents, aptitudes or achievements of the applicant, especially if these make it more likely that the applicant would make a significant contribution to or derive significant benefit from the school's extra-curricular programme.

(f) ***SPECIAL CIRCUMSTANCES***

The school will take into account any special circumstances including medical, social and personal issues which are brought to its attention. Where appropriate, documentary evidence must accompany the application.

YES ☐ *NO* ☐

Please indicate below any special circumstances, or set out in an accompanying letter, which could include health or medical information and whether the applicant has special needs or is in receipt of a statement of special educational needs.

SECTION 3: OTHER INFORMATION

a) Please give details of any particular subject choices desired, if applicable.

b) Any additional information you wish to provide.

NB: It is emphasised that it is the responsibility of parents/applicants to ensure that all information relevant to the school's criteria is provided by the closing date.

Name of Parent: _____

(Please print/type)

Signature of Parent: _____

(or type name)

Date: _____

SULLIVAN UPPER SCHOOL

Key Stage 4 – Year 11

When completed this form should be returned, along with this enclosure,
to the Headmaster's PA, Sullivan Upper School, Belfast Road, Holywood, Co Down, BT18 9EP.

Please remember to <u>include a copy of the most recent school report</u>
and any other additional information.

<u>FOR OFFICE USE</u>

NAME _____

DOB _____

YEAR APPLIED FOR _____

PREVIOUS SCHOOL _____

1 Acknowledgement sent: _____

2 Admissions criteria sent: _____

3 Decision about application: _____

4a) **<u>Pupil Admitted</u>**

i) parents informed _____

ii) date to start _____

iii) Year _____

iv) Form _____

v) House _____

4b) **<u>Pupil Not Admitted</u>**

ii) parents informed _____