Castledon College Register Of Interest

(Learners not currently attending Castledon Academy)

Name of student: DOB:

Name of parent/guardian:

Address:

Contact telephone number(home):

Contact telephone number(mobile):

Email address:

Name of current school and academic year:

Is Castledon your first preference? Yes ☐ No ☐

Details of other courses applied for:

Pathway I would like to consider (see prospectus):

- 3 year Lifeskills pathway ☐
- 2 year Vocational pathway ☐ (*please identify areas of interest in order of preference*)

I.e cooking, mechanics, Challenge Troop, hair & beauty, construction, sports, ICT, Young Enterprise, animal care, Horticulture or extended work placement, other (please specify)

- 2 year Academic pathway ☐
  Specific subjects (see prospectus)

1

2

3

4

5

- Unsure which pathway would be most suitable ☐

What are your aspirations for adulthood?

- Supported living ☐
- Independent living ☐
- Further education ☐
- Employment (*please specify employment aspirations*)
- Apprenticeship ☐ Line of work: ☐

**** All courses and pathways are subject to sufficient numbers enrolling.***

Work Experience undertaken including dates:

Subjects Studied	Estimated grade/level

Brief summary of learning difficulties as identified on the EHC and any medical conditions:

Reference name/ contact details (Head of Key Stage/ Year)

Return this form to college reception
or email to 6thform@castledon.org Telephone: 01268 760410
Head of College, Castledon School and Sixth Form College, Bromfords Drive, Wickford, SS12 0PW