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| --- | --- |
| **Name:** | **Date of Birth:** |
| **Address:** | **Telephone Number:** |
|  |
| **Previous School** **(If NOT Morecambe Bay Academy)** |  |
| **Choice 1** |  |  |
| **Choice 2** |  |  |
| **Choice 3** |  |  |
| **Choice 4** |  |  |
| **My reasons for choosing these courses are:** |
| **Future plans/careers choices: (Please outline any ideas you have at present. This will help us to check that you are choosing the right subjects)** |
| **Please tell us about any special achievements:** |
| **What qualities are you able to contribute to Sixth Form life?** |
| **Please return form either to Student Reception or via email to hfitzwilliam@morecambebayacademy.co.uk** |

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