



HELSTON COMMUNITY COLLEGE POST 16 APPLICATION FORM

(this form needs to be completed by the prospective student and returned to the Post 16 Administrator)

Name of Student: _____

Date of Birth: _____ Current School: _____

Address: _____

_____ Postcode: _____

Home Telephone Number: _____

Please write below up to 5 courses which you would like to follow in September:

(full course details can be found in our prospectus on our website www.helston.cornwall.sch.uk/web/post_16)

1. _____

2. _____

3. _____

4. _____

5. _____

Predicted Grades:

Maths:

Science:

English:

Additional Science:

Mock results:

Student Signature: _____ Date: _____

Please return completed form to Mrs Jane Rowe, Post 16 Administrator, Helston Community College, Church Hill, Helston, TR13 8NR or email to jrowe@helston.cornwall.sch.uk