

**Reference Request Form for Sixth Form Applicants (External students only)**

To be completed by either your Form Tutor or Head of Year at your present school.

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Current School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Examinations to be taken:**

|  |  |
| --- | --- |
| **Subject and qualification** | **Predicted grade** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

*Please tick as appropriate*

* 
* 
* 
* 
* **Attendance record:** Excellent Good Satisfactory Cause for concern

Attendance percentage in Y11: \_\_\_\_\_\_ %

Additional comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 
* 
* 
* 
* **Punctuality:** Excellent Good Satisfactory Cause for concern

Additional comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 
* 
* 
* **Attitude to work:** Excellent Good Satisfactory Cause for concern
* 

Additional comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 
* 
* 
* 
* **Relationship with staff:** Excellent Good Satisfactory Cause for concern

Additional comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 
* 
* 
* 
* **Relationship with peers:** Excellent Good Satisfactory Cause for concern

Additional comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional Needs** (Please provide detail in the comments box overleaf)**:**

* 
* 

SEN EAL G&T Exam concessions Other

* 
* 
* 
* 

Exclusions (please state reason and length of time)

* 
* 
* 

**Are there any safeguarding issues that we should be aware of?** Yes No

If yes, please provide the name and contact details of the safeguarding lead below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE TURN OVER**

**Suitability for chosen courses:**

|  |  |
| --- | --- |
| **Chosen course** | **Suitability** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

**Comments about ability to cope with Sixth Form study:**

|  |
| --- |
|  |

**Name of referee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please return this Reference Request Form to:**

**Chestnut Grove Sixth Form, 45 Chestnut Grove, Balham, London, SW12 8JZ**

**Email: sixthform@chestnutgrove.org.uk Sixth Form Office: 020 8772 2558**