



THE HAREFIELD ACADEMY
Achievement through Active Learning
APPLICATION REQUEST FOR GIFTED & TALENTED SPORTS STUDENTS

Please return this form when completed to The Harefield Academy, Northwood Way, Harefield, Middlesex, UB9 6ET and marked clearly for the attention of:

Miss P.A. Cottis, Director of Specialism

Please complete in BLOCK CAPITALS

Please attach a recent passport type photo of the student here.

Student Surname:	Student Forename:
1 st Parent Name: Mr/Mrs/Ms/Miss	
2 nd Parent Name: Mr/Mrs/Ms/Miss	
Address:	
Post Code:	
Home Telephone:	Email:
Parent 1 Mobile:	Parent 2 Mobile:
Current School:	
School Address:	
Post Code:	
Tel. No:	
Application for September _____ (Insert year e.g. 2009, 2010 etc)	
List the names and year groups of any siblings currently at The Harefield Academy	
1. _____	Year Group _____
2. _____	Year Group _____
3. _____	Year Group _____

Please complete all sections

Please identify the main sport(s) that you would like your son/daughter to be considered for:

Does your son/daughter belong to a club? If yes, please give full details including name of club, coach and contact numbers.

Please list all of your son/daughter's sporting achievements to date:

Please state why you feel that your son/daughter should be considered for a place at The Harefield Academy.

Does your son/daughter have any disability and therefore would like to be considered within our Gifted & Talented Disability Squad of Excellence?

The following two questions must be completed by the STUDENT:

In one or two sentences, please explain why you feel you should be considered for a 10% place at The Harefield Academy.

Please state what you would consider to be your aspirations (that is, your sporting ambition and ultimate goal in life)

If you require support in completing this form, please contact The Academy directly on 01895 822108 and we will endeavour to give you as much help as possible.