

Arts Aptitude Application Form Year 7 September 2024

Please complete this form in BLACK INK using BLOCK CAPITALS and return to: Admissions Office, Shireland Collegiate Academy, Waterloo Road, Smethwick B66 4ND by Friday 29 September 2023.

You may alternatively e-mail the form to: sheila.riley@collegiateacademy.org.uk

Please put 1 in the box next to your first choice and 2 in the box next to your second choice

ART	
DANCE	
DRAMA	
MUSIC	

PERSONAL DETAILS OF CHILD

Surname:	As registered with the Local Authority	
First Name:		
Male or Female:		
Date of Birth:		
Primary School:		
PARENT(S)/CARER (S) INFORMATION		
Title Mr & Mrs/Mr/Mrs/Miss/Ms (delete as applicable)		
Surname:		
Home Address:	If this is not the address where the child normally resides then	
	please give further details on a separate sheet	
Postcode:		
Contact Telephone No:		
Email :		
Signed:	Date:	
Print Name:	Parent/Guardian	