# 

# Career Academies UK in Scotland

Student Application Form 2014 – 2016

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| Contact information | | | | | | | | | | | | | | | | | | | | | | | | |
| Last name | | | First name | | | | | | Middle name (if applicable) | | | | | | | | | Your National Insurance number | | | | | | |
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|  | | | | | | | | | | | | | | | | | | Date of birth | | | Age | | Male | Female |
| /    / | | |  | |  |  |
| Is this your legal name (as shown on your birth certificate)?  **Yes**  **No** | | | | | | | | | If no, what is your legal name? | | | | | | | | | | | | | | | |
| Nationality: | | | | | | | | | Town/City and country of birth: | | | | | | | | | | | | | | | |
| Languages spoken : | | | | | | | | | E mail address: | | | | | | | | | | | | | | | |
| Address | |  | | |  | Town | | | |  | | | | | |  | Post code | | | Home telephone number | | | | |
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| Name of Parent / Guardian | | | | | | |  | Parent / Guardian mobile telephone number | | | | | | | | | | | | Student mobile telephone number | | | | |
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| **Do you have a current bank account? Yes**  **No**  **If no, do you agree that you will open a bank account by January 2015? Yes**  **No** | | | | | | | | | | | | | | | | | | | | | | | | |
| ***Part of the Career Academy programme involves an internship in a company. ALL companies, for security reasons, ask to see a passport (or full birth certificate if you are a British National) as proof of identity and right to work in the UK.***  **Do you have a passport (and visa/permit if you are not an EU Citizen) that will still be valid in August 2015? Yes**  **No**  **Do you have a full birth certificate as proof of identity and right to work in the UK (British Nationals only)? Yes**  **No**  **Can you confirm it is your intention to stay on at school through 5th & 6th year and that you will be available for a 5 week internship that starts in the last week of term in June 2015? Yes**  **No** | | | | | | | | | | | | | | | | | | | | | | | | |
| In case of emergency | | | | | | | | | | | | | | | | | | | | | | | | |
| Name of person we should contact in an emergency: | | | | Relationship to you: | | | | | | | | | | Their phone number: | | | | | | | | Their work phone number: | | |
| Data Protection  * Any personal information you give to us will be processed in accordance with the UK Data Protection Act 1998 * Any information you volunteer will be stored in a secure file and will only be processed by authorised members of the Local Authority and Career Academies UK * Personal data and other information supplied may be shared under agreed terms with appropriate project partners to facilitate your admission, attendance and progression through the internship and assessing the impact of this. * Your details will be removed immediately from our files at your request if you decide at any time to withdraw | | | | | | | | | | | | | | | | | | | | | | | | |
| Your signature | | | | | | | | | | | | | | | | | | | | | | | | |
| Your school will use the information to consider your application onto the Career Academies UK programme. We (your school/ Career Academies UK) may also use the information you provide to contact you in the future.  Please tick this box if you agree to give consent to allow any footage and or/photographs of you to be used for PR, marketing publications and videos by your school, Career Academies UK, the business your Mentor works for or that provides your internship.  Career Academies UK would like to access the School Leaver Destination Results that Skills Development Scotland will hold for you when you leave school to monitor and evaluate the impact of the Career Academies UK Programme. Please tick this box if you agree to Career Academies UK accessing this data after you leave school.  I confirm that the information I have provided on this form is true and correct to the best of my knowledge. | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Student Signature: | | | | | | | | | | | | Parent/GuardianSignature: | | | | | | | | | | | |
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| ***Please complete pages 1-3 and return to your Career Academies UK School Coordinator*** | | | | | | | | | | | | | | | | | | | | | | | | |
| Education | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list the subjects you studied in S4 | | | | | | | | | | | | Level (e.g. National 4/5) | | | | | | | Predicted Grade | | | | Actual Grade | |
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| Please list the subjects you are studying in S5 | | | | | | | | | | | | | | | | | | | Level (e.g. National 4/5 or Higher) | | | | | |
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| Community | | | | |
| Please list any qualifications achieved out of school | | | | |
| Qualification | | | Grade | Year Awarded |
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| Are you currently working part-time? | | | | |
| Yes | No |  | | |
| If yes, please give details of your employer, address, role and weekly hours. *(max.330 characters)* | | | | |
|  | | | | |
| Please list below any work experience or volunteering activities you have undertaken in the last three years *(max.750 characters)* | | | | |
| Please list any other responsibilities outside school that you have. *(max.1000 characters)* | | | | |
| ***Please complete pages 1-3 and return to your Career Academies UK School Coordinator*** | | | | |

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| General information |  |
| Please answer the following questions as fully as possible.  This is an opportunity to display your written communication skills, so please use complete sentences. | |
| Why are you interested in joining a Career Academy? *(max.1500 characters)* | |
| What do you hope to gain personally through your Career Academy? What skills would you like to improve upon or develop further? *(max 1100 characters)*    What do you hope to gain personally through your Career Academy? What skills would you like to improve upon or develop further? | |
| What are your current career aspirations? *(max.1100 characters)* | |
| What is the one thing you have done of which you are most proud? Why? *(max.1000 characters)* | |
| How would your friends describe you? *(max.1000 characters)* | |
| ***Please complete pages 1 – 3 and return to your Career Academies UK School Coordinator*** | |

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| **To be completed by the Career Academies UK School Coordinator**  *You may find it useful to have this form to hand during the student’s interview to complete the below.* | |
| Please read the following statement and complete accordingly:  ‘I confirm that this student meets the Career Academies UK student selection criteria and has been selected for the following reasons in particular’: | |
| Coordinator Name:  Coordinator Signature:  Date: Click here to enter a date. | SMT Name:  SMT Signature:  Date: Click here to enter a date. |
| ***Please return this form by email, completed fully by the student, and signed by the Career Academies UK School Coordinator and SMT member to: Isobel Maughan (***[***isobel.maughan@careeracademies.org.uk***](mailto:isobel.maughan@careeracademies.org.uk)***) once this student has been selected. Thank you.*** | |