Chichester High Schools Sixth Form
KINGSHAM ROAD CHICHESTER WEST SUSSEX PO19 8AE

INTERNATIONAL BACCALAUREATE
External Applicants Form 2010

SURNAME	
FORENAME/S	
DATE OF BIRTH	
Please complete details below if not already attending Chichester High Schools	
ADDRESS	
TELEPHONE NUMBER	
PRESENT SCHOOL (and telephone number)	
Do you receive extra time/support in exams? If so please give details.	

Please circle below how you first heard of Chichester High Schools Sixth Form IB World School

Local Radio Observer Newspaper Other Newspaper Reputation Family member attended

GCSE SUBJECTS	**PREDICTED GRADE**

CAREER PREFERENCE please indicate if known

Subjects you wish to study, select one from each Group		
Group 1	**World Literature**	**World Literature**
Group 2	**French, Spanish ab., Russian ab.**	
Group 3	**History, Geography, Philosophy**	
Group 4	**Biology, Physics**	
Group 5	**Mathematics, Mathematical Studies**	
Group 6	**Visual Arts, Chemistry**	

I approve my son's/daughter's intention to study the International Baccalaureate

Parent's signature_____Date:_____

Sixth Form Centre Reception Tel: 01243 832545
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