



**Birkdale**  
School

**SIXTH FORM ACADEMIC SCHOLARSHIP EXAMINATION APPLICATION FORM**

Full name of candidate \_\_\_\_\_

Date of Birth \_\_\_\_\_

Name & Address of  
Parent/Guardian \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Present school attended \_\_\_\_\_

**Subjects to be offered in addition to General Paper, for the Sixth Form Academic Scholarship Examination:**

1. \_\_\_\_\_ 2. \_\_\_\_\_

I wish my son/daughter to be entered for this examination

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_

***External candidates should also complete the School Registration Form together with the Sixth Form Application Form. All three forms and a copy birth certificate should be returned with the registration fee of £50 to: The Registrar, Birkdale School, Oakholme Road, Sheffield S10 3DH **by the deadline stated on the school website.*****