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| C:\Users\jmccolgan320\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.MSO\98666312.tmp  **Application for Glentoran FC**  **Youth Football Academy**  **in partnership with**  **Robbie Fowler Education & Football Academy** | | |
| SURNAME: | | |
| FORENAME(S): | | DATE OF BIRTH: |
| ADDRESS: | | POSTCODE: |
| HOME TELEPHONE NO: |
| MOBILE TELEPHONE NO: |
| EMAIL ADDRESS: | | |
| CURRENT SCHOOL: | | |
| Current Football Club: | Position(s) Played: | |
| NAME OF PRIMARY PARENT(S)/CARER(S)  Mr / Mrs / Miss / Ms | NAME OF SECONDARY PARENT(S)/CARER(S)  Mr / Mrs / Miss / Ms | |
| RELATIONSHIP TO THE APPLICANT: | RELATIONSHIP TO THE APPLICANT: | |

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| **ACADEMIC INFORMATION** | | | |
| **EXAMINATIONS TO BE TAKEN JUNE 2016** | | | |
| EXAM  GCSE, BTEC, Occupationnel Studies / OTHER etc. | SUBJECT | EXAM BOARD  (If known) | ESTIMATED or CONFIRMED GRADE |
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**Signature of student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Parent / Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:**

**Return your completed application to:** [**jmccolgan320@c2kni.net**](mailto:jmccolgan320@c2kni.net)