Reference form to be considered for a free place

This form should be completed in full by both yourself, your guardian and your science teacher. When it is completed it should be returned to clare.boyle@itaegroup.co.uk. PART A should be completed by your teacher and PART B by yourself. Your parent or guardian must complete PART C and submit the form on your behalf. Incomplete forms will not be accepted.



Student name:

School attending: Location applying for a place at:

PART A (To be completed by the science teacher/referee)

PART A (TO BE COMPLETED BY THE TEACHER)						
Name of referee	Position of referee					
Referees email address	Referees contact number					
Is the student above eligible for	Does the student above have					
pupil premium funding?	attendance above 98%?					
Please comment on the						
student's attitude to learning						
Please comment on the						
student's commitment to						
progress in science						
Does the student have a keen						
interest in medicine, health or						
the biosciences?						
Is this student likely to be						
accepted onto a course in HE in						
the medicine, health or						
bioscience sector?						
	PART B (TO BE COMPLETED BY THE STUDENT)					
What career path are you						
wanting to study?						
Outline why you wish to follow						
the career path you are						
choosing.						
This section will carry the most						
weighting when assessing your						
application for a free place. Remember to state which						
career path you wish to follow						
and give examples the things						
you have experienced that have						
influenced your decision.						
What is your favourite aspect of						
science and why do you enjoy						
it?						
Why do you believe you should						
be considered for Future Medic						
2018?						
Outline 3 other things you have,						
or are in the process of doing to						
get a greater experience of what						
it's like to work in health or						
medicine						
PART C (TO COMPLETED BY THE PARENT/CARER)						
Parent / Carer Name						
Parent / Carer Email Address						
Parent / Carer Contact Number						