

# Lansdowne College

**40-44 Bark Place London W2 4AT**  
**tel 020 7616 4400**  
**email education@lansdownecollege.com**  
**website www.lansdownecollege.com**

<b>For Office Use Only</b>
Date
Fee
Ref No.

## Student Information

Title
First Name
Surname
Address
Postcode

Telephone (Day)
Telephone (Evening)
Fax Number and/or email address
Date of Birth
Current School

<b>Details of person responsible for paying fees</b>	
Name	
Address	
Postcode	
Tel	
Fax	

<b>Address of student during course (if different)</b>	
Address	
Postcode	
Tel	
Fax	

## Course Details (please give details of all the subjects you intend to study at Lansdowne)

	Subject 1	Subject 2	Subject 3	Subject 4	Subject 5
Subject					
Level: GCSE/ AS/A2					
If not full course unit title					
Exam Board					
Proposed exam date					
Previous grade (if applicable)					

<b>Please indicate the weeks you are available</b>	
<b>Available ✓</b> <b>Unavailable ✗</b>	
Week 1	
Week 2	
Week 3	

