SUSSEX DOWNS COLLEGE

REFERENCE

For admissions use only:
Person Code

Please hand to your School or College for completion

WHICH CAMPUS(ES) IS APPLICANT APPLYING TO?

Eastbourne ☐ Lewes ☐

Name of applicant	Date of Birth
Address of applicant	
School/College	
Dates of attendance	
Programme/Subjects applied for	

The above named applicant has applied for a programme at the College and requires a reference.

We should be grateful if you would complete this form and return it to the College as soon as possible. Please note that this reference may be shared with the applicant and/or parents unless you state that you prefer that the information is not shared. Please add any comments which you feel may assist us or contact us if you wish to discuss the application further. Thank you for your assistance in this matter.

EXAMINATIONS TO BE TAKEN THIS ACADEMIC YEAR. PLEASE GIVE PREDICTED/MOCKS RESULTS

Subject	Type of qualification and Level (Higher, Intermediate, Foundation) if appropriate	Predicted Grades	Mock Results	Actual Result (if known)

ANY OTHER QUALIFICATIONS/ACHIEVEMENTS