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|  |  University Visits & Apprenticeship Interviews or Assessment Days form |

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| Name: | Form: |

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| Date of Proposed Trip: | Venue: |

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| Reason (e.g. interview request, assessment day or visit to first choice university): |  |

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| Lessons to be missed: | Subject | Staff Signature |
| Period 1 |  |  |
| Period 2 |  |  |
| Period 3 |  |  |
| Period 4 |  |  |
| Period 5 |  |  |

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| Tutor’sSignature: | Parent’sSignature: |
| Director of Post 16 Education(Mr Biggs): | Sixth Form Admin. (Mrs Price) Signature: |

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| **Please hand this form to Mrs Price BEFORE your visit** |