

## Churchdown School Teacher Taster Day Application Form



<b>NAME:</b>	<b>SUBJECT of interest:</b> <small>(If you are unsure, please email Trish Church: pac@churchdownschool.com)</small>	<b>DEGREE TITLE:</b>
<b>ADDRESS:</b>	<b>PHONE NO:</b>  <b>EMAIL:</b>	<b>Date of Degree completion: mm/yy</b>  <b>DEGREE RESULT:</b>

Have you been into any other schools for observation?

Yes       No

What are you hoping to gain from this experience?

Have you already received an offer from an ITT provider, if so which one

Yes       No       Name of Institution .....

**OR**

Are you considering an application in the future

Yes       No       Name of Institution .....

Are you a parent/carer or related to any student currently at Churchdown School Academy?

If so, please specify.....

Please return form to [pac@churchdownschool.com](mailto:pac@churchdownschool.com)