Form for website

**Potential Student Visit Request**

Thank you for your interest on Phoenix College. Please complete the form below to be booked in one of our open days.

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| **Potential student’s information** | |
| Name: |  |
| Address: |  |
| Contact Number: | Home:  Mobile: |
| Date of Birth: |  |
| Contact Number: |  |
| Do you have an EHCP? | Yes / no |
| Which borough are you registered with? |  |
| What is your current, or most recent, educational placement (school, college)? |  |
| **Parent/Guardian/Carer information** | |
| Name: |  |
| Address: |  |
| Contact Number: | Home:  Mobile: |
| Email Address: |  |

We will get in touch shortly with dates and time slots for your visit.

Hope to see you soon!