

**ST JOHNS C OF E PRIMARY SCHOOL**

Supplementary Information Form

Child’s full name: …………………………………………………………. Date of Birth: ……………………………….

Address: ……………………………………………………………………………………… Post Code: ……………………..

Mother’s full name: ……………………………………. Father’s full name: ……………………………………….

Home telephone no: ……………………………………. Mobile no: ……………………………………………………

Religion: ……………………………………… Place of worship attended: …………………………………………….

Is your child the first born? **Yes/No** Position in Family: ………………………………………….

Gender: **Male/Female** Academic Year applying for: …………………… Class: ………………….

Current/Previous School: ……………………………………………………………………………………………………..

Does the child have a sibling at St John’s? **Yes/No** If yes, names of siblings:

Before submitting this form please confirm that you have seen a copy of the school’s Admissions Policy **Yes/No**

I am the person with parental responsibility for the child named above and the information given is true. I understand that false or misleading information may result in the offer of a place being withdrawn.

Parent / carer’s signature ………………………………………… Date of application: ………………………….

Please return this application form to the school office with the following:

* Proof of the child’s date of birth:
* Original recent proof of address:
* Religious Certificate:
* Any other supporting documents

**CATEGORY OF APPLICATION**

There are four categories of places for which applicants can apply (see Admissions Policy)

Please indicate the place for which you wish to apply by placing a tick against one of the following categories of places available:

|  |  |  |
| --- | --- | --- |
| **NO** | **CATEGORY** | Please tick one box only |
| **1** | **Place for a child currently in Public Care or children who have been adopted or made subject to residence orders or special guardianship orders.***If you are applying for a place in this category please go to section A* |  |
| **2** | **Foundation (Christian) Place for a child whose parents/carers are active members fo a Christian denomination***If you are applying for a place in this category please go to section B on page 3* |  |
| **3** | **Foundation (World Faiths) Place for a child whose parents/carers are active members of non-Christian Major World Faiths (see Admissions Policy) who wish their child to attend a Church of England School.***If you are applying for a place in this category please go to section B on page 3* |  |
| **4** | **Open Place for a child not included in categories 1, 2 and 3 above.***If you are applying for a place in this category no further information if required by the school.* |  |

**SECTION A**

If you are applying for a place on behalf of a child in public care or who has been adopted or made subject to residence orders or special guardianship orders, you should contact the School Office immediately. The Head Teacher will then contact the Local Authority to confirm the child’s circumstances.

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**SECTION B**

It is in an applicant’s interest, for applications under criteria 2 and 3 to complete this section of the form with a minister or other faith leader confirming the pattern of attendance.

Place of Worship which the family attends: …………………………………………………………………………..

Have you attended at least once a month for a period of a year? **Yes/No**

Please ask your minister or faith leader to complete this section

Name of Minister / Leader: ………………………………………………………………………………………..

Address of Minister / Leader: …………………………………………………………………………………….

…………………………………………………………………………………………………………………………………..

Telephone Number: ………………………………………………………………………………………………….

I support this application for a place at St John’s C Of E Primary School and can confirm that the family has attended this place of worship at least once a month for a period of a year.

Name: …………………………………………………………………………………………………………………

Signed: ……………………………………………………………………………………………………………….

…………………………………………………….

Official Stamp: