



**SUPPLEMENTARY FORM FOR SCHOOL ADMISSION to  
 ELTHAM CHURCH of ENGLAND SCHOOL - RECEPTION 2020**

**FOR PLANNED SEPTEMBER ADMISSION TO RECEPTION, A COMMON APPLICATION FORM MUST BE COMPLETED ONLINE AND SUBMITTED TO THE ADMISSIONS DEPARTMENT OF THE BOROUGH IN WHICH YOU RESIDE.**

**Those parents wishing to apply for a place at Eltham Church of England School under the faith criteria should also complete this SUPPLEMENTARY FORM and return it to the school no later than 15<sup>th</sup> January 2020.**

Faith applicants who do not complete and return a Supplementary Form will be assessed under the last criterion (home/school distance).

**Section 1 - Pupil Information**

Surname: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Forename(s): \_\_\_\_\_

**Section 2 - Parent/Guardian Information**

Name of parent(s)/guardian(s): \_\_\_\_\_

Home Address: \_\_\_\_\_  
 \_\_\_\_\_

Please complete **either**: Section 3a (Anglican Church Worshippers)  
**or**: Section 3b (Other Christian Faith Worshippers)

**Section 3a –Anglican Church Commitment**

Name and address of the Church which you and your child attend: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you and your child attended this Church at least twice a month for 2 years – *please tick one box.*

Yes  No

Please give dates **FROM:** \_\_\_\_\_ **TO:** \_\_\_\_\_



**Section 3b – Other Christian Faith Commitment**

Name of Church which you and your child attend: .....

Name of Priest | Minister | Faith Leader: .....

Address: .....  
.....

Denomination of Church: .....

Have you and your child attended this Church for at least twice a month for 2 years – *please tick one box.*

YES

NO

Please give dates **FROM:** **TO:**

**If you have moved recently, please give the name & address of your previous Priest, Minister or Faith Leader:**

Name of Priest, Minister or Faith Leader: \_\_\_\_\_

Address: .....  
.....

Please give dates: **FROM:** **TO:**

**Section 4 - Declaration**

I confirm that the information given above is correct and that I have read and understood the School's Admission Policy.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/Guardian)

Contact telephone no:

**Please note: The school will now contact your Priest, Minister or Faith Leader to verify the information given above.**



**RE PLANNED ADMISSION FOR RECEPTION CLASS:**

If there has been no response from your Priest, Minister or Faith Leader by 7th February 2020, or if your Supplementary Information Form has not been validated in that time, the school will contact you by email.

We will email you no later than 10th February 2020 if your application form has not been validated – as we will not be able to consider your application under the worship criteria.

Please write your email address clearly below:

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(For Office Use)

I hereby confirm receipt of the Supplement Information Form for

\_\_\_\_\_ (Name of child)

Received on \_\_\_\_\_

Signed \_\_\_\_\_