



**SUPPLEMENTARY FORM FOR ADMISSION to
 ELTHAM CHURCH of ENGLAND SCHOOL
 IN-YEAR APPLICATIONS**

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: _____

Email address: _____

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



(For Office Use)

I hereby confirm receipt of the Supplement Information Form for

_____ (Name of child)

Received on _____

Signed _____

