

## Supplementary Information Form

Please tick the appropriate box to inform us to which type of place you are applying for. Please refer to the Admissions Criteria for guidance or contact the school office.

Childs name.....DOB.....

Parent / Guardian's name and address.....

.....

Telephone number.....

Open Place

Please return this form to the school office.

Foundation Place

Please provide the following information.

Place of Worship.....

Length of attendance..... Frequency.....

Name, address and telephone number of Religious Leader who can confirm your attendance:

.....

.....

If you have moved recently, please give name, address and telephone number of your previous Religious Leader.

.....

Signature of Parent / Guardian .....

Please see overleaf for your Religious Leader to provide additional information.

## Religious Leader Reference

The parent / guardian of the child named overleaf has applied for a place at St Pauls CE Primary School and has given your name as a reference. Would you be kind enough to provide us with the following information? Thank you for your co-operation.

Please confirm which organisation you are a member of;

Church of England.

Churches Together in England .

Churches Together in Britain and Ireland (including associated members).

The Evangelical Alliance (including associated members).

How long have the family worshipped with you?

Under 6 months

6 months to 1 year

1 – 2 years

2 years +

How often do they attend?

Weekly

At least twice a month

Monthly

Other (please give details)

Name of Religious Leader.....

Signature..... Date / /

Official Stamp (if you do not have a stamp please supply a compliment slip)