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| **SUPPLEMENTARY INFORMATION FORM (SIF) FOR ADMISSION TO**  **ST MARY MAGDALENE C OF E SCHOOL SECONDARY PHASE** | | | | | | | | | | | | |
| **Completion Instructions:** St Mary Magdalene C of E School Secondary Phase will operate on our Blackheath Campus from September 2016-August 2018 and then on our Greenwich Peninsula Campus from September 2018 onwards.  **All applicants** must complete an eAdmission online application or common application form and submit it direct to their local borough council.  **All applicants** must complete and return this Supplementary Information Form and return it direct to the secondary campus at Old Dover Road, Blackheath SE3 8SY.  Applicants applying under the foundation (church commitment) place criterion must also complete PART B of this form. Failure to return the Supplementary Information Form, along with a clerical letter, will result in your application being considered for a community place.  **If you wish to apply for a place at St Mary Magdalene C of E School Secondary Phase, you must state it as one of your preferences on the eAdmission/Common Application form when you submit it to your Local Authority.** | | | | | | | | | | | | |
| **PART A (ALL applicants must complete this section)** | | | | | | | | | | | | |
| 1. **Name of school site being applied for** | | | | | | | St Mary Magdalene C of E School  - Secondary Phase | | | | | |
| 1. **Pupil information** | | | | | | | | | | | | |
| Surname of child: | |  | | | | | First Name(s): | | | | | |
| Date of Birth: | |  | | | | |
| Year group applying for: | |  | | | | | Gender: | | | | Male/Female  *Delete as appropriate* | |
| 1. **Family information** | | | | | | | | | | | | |
| Name of parent(s)  /carer(s) | |  | | | | | Relationship to child: | | | |  | |
| Home Address: | |  | | | | | Telephone numbers | | | | | |
| Home: | | | | | |
| Mobile: | | | | | |
| Post Code: | |  | | | | | E mail: | | | | | |
| 1. **Name of Current or most recent School/Nursery** | | | | | | |  | | | | | |
| 1. **Siblings (brothers/sisters/step siblings/half siblings)** | | | | | | | | | | | | |
| Name | | | | Date of Birth | | | | School currently attending | | | | |
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| **PART B** | | | | | | | | | | | | |
| 1. **Foundation Church Commitment ( in the event of oversubscription)** | | | | | | | | | | | | |
| Name of Church currently attending: | | | | | | |  | | | | | |
| Church Address: | | | | | | |  | | | | | |
| Church telephone: | | | | | | |  | | | | | |
| Name of Minister: | | | | | | |  | | | | | |
| Denomination if this is not an Anglican Church  *Please ensure that it is a full member of Churches Together in Britain and Ireland (*[*www.ctbi.org.uk*](http://www.ctbi.org.uk) *) or the Evangelical Alliance (*[*www.eauk.org*](http://www.eauk.org) *)* | | | | | | | | | |  | | |
| Do you attend church services at least twice a month? (please tick) | | | | | | | Have you worshipped in this Church for at least 12 months prior to the closing date for applications? (please tick) | | | | | |
| Yes |  | | NO | |  | | YES | |  | NO | |  |
| If 12 months or less please supply the name of your previous church and minister: | | | | | | | | | | | | |
| I**n order for your application to be considered under our Foundation Church Commitment criteria, it must be accompanied by a letter (on headed paper) from your church confirming the following:** Parent’s name(s)  Child’s name & date of birth  Church affiliated to CTBI or EA with its membership details  How long you have worshipped at the church  How often is your attendance at the church  **A template letter is available on the following page.** | | | | | | | | | | | | |
| Signature of Parent/ Carer: | | | | | |  | | | | | | |
| Print Name: | | | | | |  | | | | | | |
| Date: | | | | | |  | | | | | | |

**Please provide a letter on your church HEADED PAPER that contains ALL of the details listed below. Do not write on this sample letter please, a new letter should be prepared.**

**If you do not provide a church letter, or if ANY of the details below are missing, your letter will not be accepted and your child will be considered for a community place based on distance from the school and not under the faith criteria:**

SAMPLE LETTER TO ACCOMPANY SUPPLEMENTARY APPLICATION FORM

To: Admissions

St Mary Magdalene C of E School

Old Dover Road

London SE3 8SY

Date

I write to confirm that [insert applicant student’s name and date of birth] along with their family [insert parent/carers names] worship at our church.

I can confirm that the family have been worshipping at our church for [please insert length of time] and attend [please insert how often they worship, i.e. daily, weekly, fortnightly, monthly, infrequently].

Please state if your church is an Anglican Church or a full member of Churches Together in Britain and Ireland (CTBI), or a full member of the Evangelical Alliance (EA).

If CTBI or EA please state membership details:

Church leader signature and title