**ST LEONARD’S C.E. PRIMARY SCHOOL SUPPLEMENTARY INFORMATION FORM**

**Mitcham Lane, Streatham, SW16 6NP Tel: 020 8769 2712**

**To be completed by applicants applying under criteria 2, 3 and 5 and returned to school by 15th January 2017.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Child’s Last  Name: | |  | | First Name: | |  | | |
| Date of Birth: | |  | | | | | | |
| Parent(s)/Carer(s) Name(s): | | |  | | | | | |
| Home address: |  | | | | | | | |
|  | | | | | | | Postcode: |  |
| Home telephone: | |  | | | Mobile: | |  | |

CHURCH ATTENDANCE

Families should be regular worshippers at one of the following churches (please tick)

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| St Leonard’s  Church |  | | Furzedown Church Group (please specify) | | | |  | | | |
| St Peter’s  Church |  | | Streatham Baptist Church | |  | | | Streatham Methodist Church | |  |
| Are you on the Church’s electoral roll (Church of England churches)? | | | | | | YES / NO (please circle) | | | | |
| Are you on the members list? (Baptist or Methodist Churches) | | | | | | YES / NO (please circle) | | | | |
| Member of Churches Together in England or Evangelical Alliance (please name church) | | | | | |  | | | | |
| Have you attended fortnightly for the last two years? | | | | | Yes | | | | No | |
| Name of Priest/Minister: | |  | | | | | | | | |
| Home Address of Priest/Minister: | | | | | | | | | | |
| Postcode: | | | | | | | | |  | |
| Telephone Number of Priest/Minister: | | | |  | | | | | | |
| I confirm that the information given is correct and that I have read the Admission Policy | | | | | | | | | | |
| Signed: | | | | | Date: | | | | | |

PRIEST/MINISTER’S REFERENCE

Please do not complete the priest/minister’s section below. This will be forwarded by the school to verify the information given above.

|  |  |  |  |
| --- | --- | --- | --- |
| Do you agree with the parent/carer’s information in  relation to church attendance? | | Yes | No |
| If no, please state where your view differs from that of the parent/carer. | | | |
| Is your church a member of the Church of England? | | Yes | No |
| **or** | | | |
| Is your church a member of the Churches Together in England? | | Yes | No |
| **or** | | | |
| Is your church a member of the Evangelical Alliance? | | Yes | No |
| Please supply registration number if applicable | |  | |
| Name: | Signature: | Date: | |
| Official Church Stamp | | | |

This form must be returned to the School Office at St Leonard’s C.E. Primary School, Mitcham Lane, SW16 6NP.