

**SUPPLEMENTARY INFORMATION FORM  
FOR ADMISSION TO ST SAVIOUR'S CE PRIMARY**

**THIS FORM MUST BE RETURNED TO SCHOOL BY 15 JANUARY**

**IMPORTANT INFORMATION – PLEASE READ BEFORE COMPLETING THE FORM**

This is a Church of England School closely linked with the Churches of St Saviour's and St Paul's in the parish of Herne Hill. The school has a strong Christian ethos and the Governors hope all children will take a full part in the activities of the school, including assembly, collective worship, occasional Church services and religious education based on the Bible and the beliefs of the Christian faith.

**FILLING IN THIS FORM DOES NOT GUARANTEE YOUR CHILD A PLACE**

**Completion instructions:**

Parents should fill in this form **only** if they are applying for a foundation place. The completed form should be returned directly to the school. Failure to return this form will result in any application being considered under the open place.

You should ensure that you have a copy of the admission policy prior to completing the form and returning it to the school by 12.00 hours on 15 January. You must also complete the Common Application Form available from your Local Authority and name this school on that form. The Common Application Form should be returned directly to your Local Authority.

**NB: Parents should only complete this form if they are applying for a Foundation (Church place, 24 places).**

**YOU MUST ANSWER EVERY QUESTION**

The following questions will enable us to apply the Admissions Policy to your child.

**PART 1 – PLEASE TELL US ABOUT THE CHILD YOU ARE APPLYING FOR:**

**A. Pupil Information:**

Surname of child: .....

Other Name(s): .....

Date of birth: .....

Male ☐

Female ☐

**B. Parent/Guardian Information**

Name of parent(s): .....

Name of guardian(s): .....

Home address: .....

Home telephone: ..... Daytime telephone (if different): .....

**PART 2 - CHURCH COMMITMENT**

**Name of Church you attend:** .....

If this is not an Anglican Church, please state the denomination to which your Church belongs: .....

Do you attend Church at least fortnightly? Yes ☐ No ☐

Have you worshipped in this Church for at least 12 months prior to the closing date for application?  
Yes ☐ No ☐

**If you have worshipped for less than 12 months at your current Church please supply the name and address of your previous Church and Minister below, in addition to your current Minister overleaf.**

### PART 3 - CHURCH INFORMATION

Name of Priest/Minister: .....

Address of Priest/Minister: .....

.....

Post Code: .....

### PART 4 – DECLARATION

I confirm that the information given above is correct and that I have read the admission policy.

**Signed by \*Parent/Guardian:** ..... **Date:** .....

**Print Name and Title: (\*MR/MRS/MS/MISS)** .....

*\*Delete as applicable*

### For Minister's Reference only

**Please do not complete the Minister's section below. The school will send this form to your Minister. The Minister should complete the following section to verify the information given in SECTIONS 2 and 3 above.**

Can you confirm that the applicant is a committed member of your Church in the terms of our admission policy, i.e. that they have attended worship at least fortnightly for 12 months prior to 15 January?

**Yes**

☐

**No**

☐

Are there any particular circumstances that the governors should take into account, e.g. if church attendance has been less than fortnightly because the applicant is looking after an elderly relative, or for some other valid reason? If yes, please give brief details below.

.....

.....

Is your Church a Trinitarian Christian Church, which is a full member of a Churches Together in Britain & Ireland or The Evangelical Alliance? Please specify.

**Yes**

☐

**No**

☐

Please supply Registration No: .....

**NB:** If a family is refused a place at the school and appeals against the governors' decision, this form may be used as evidence at the appeal.

Signed: ..... (Minister)

Date: .....

Print Name: .....

Official Stamp:

### For office use only

Sections completed: 1 ☐ 2 ☐ 3 ☐ 4 ☐

Received by: (print name) \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Minister form sent: \_\_\_\_\_ (date) Minister form received: \_\_\_\_\_ (date)

Proof of address copied: \_\_\_\_\_ Final criteria given: \_\_\_\_\_