



CHRIST CHURCH CE PRIMARY SCHOOL

Batten Street
London SW11 2TH

Headteacher
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RELIGIOUS REFERENCE

Family Name:

Name of Child

Class applied for

The above-named family has applied for a place at Christ Church School and need you to complete the information requested below in support of their application. Completed references must be completed and returned to Mrs B Kashani, School Business Manager at the address shown above at your earliest convenience.

Name of Church: _____

Address _____

Postcode: _____ Tel: _____ Email: _____

Do you know the family making this application? YES NO

Approximately how long have they worshipped at this church? Drop-down List

Do they attend a place of worship Regularly? Occasionally? Not to your knowledge

Church attendance is normally taken to mean attendance of the child and at least one parent for a minimum of 2 services a month over a period of at least a year. Should applicants have moved into the area within that period, proof of attendance will be sought from their previous church.

Do you have any other comments you would like to make in support of this application?

Is your Church recognised by one of the following? Churches together in Britain & Ireland The Evangelical Alliance The African Caribbean Evangelical Alliance

Name of Priest, Minister, or Religious Leader completing this form

Signed _____

Date _____

Thank you for taking the time to complete this reference.

School Business Manager
Christ Church CE Primary School