



**SUPPLEMENTARY INFORMATION Part A**

**Primary Applications September**

**2023/24**

Please print in **BLOCK CAPITALS** and return this form by 4:00pm on 15<sup>th</sup> January 2023 to:

*Post:* **Bradford Academy, Teasdale Street, Bradford, BD4 7QJ—FAO Attn: Miss Philippa Darbandi**

**Applicants Details**

Surname: .....

Forename: .....

Date of birth: ...../...../.....

Student’s address: .....

.....

.....

Postcode: .....

Telephone no: .....

**Present  
Nursery**

Name of present Nursery: .....

**Please indicate which local authority if not in Bradford**

**Parent/Carer Contact Details**

Mr/Mrs/Miss/Ms/Dr/Other

Name: .....

Daytime contact no: .....

Mobile no: .....

Email: .....

**Faith Information**

Please indicate Christian or other faith: .....

Place of worship .....

Attends on average twice a month            Yes                            No

Attached written reference from a religious leader            Yes                            No



Applications must be supported by a written reference from a Minister of Religion. There is no minimum qualifying period of attendance.

**Please sign and date the declaration below**

I have read a copy of the admissions policy.

I understand that failure to disclose any information, or provision of false information, may result in a place being withdrawn should it be offered.

Parent/Carer signature: ..... Print name: .....

Date: ...../...../.....

**Request for Religious Leader's reference**

**Name and address of family making application:**

**Dear**

The family (parent/carer) named above have made a Primary Application for admission to Bradford Academy on the basis of Faith commitment. In order for us to consider this application on the basis of Faith commitment we would ask that you provide the school with the following information.

1. What is the name of the place of worship? .....
2. Is the above child or family (parent/carer) a member of your Church/place of worship?  
**Yes/No**
3. Is their attendance at worship **fortnightly/monthly/less?**

There is no minimum qualifying period for attendance.

**Thank you for completing this form, please sign below and return to the school.**

**Signed:** .....

**Telephone/Email:** .....

**Name:** .....

**Position:** .....

**Date:** ...../...../.....



**Part B**

**Children of Staff**

Please indicate if you are applying on the basis of child of staff

Yes/No

Name of Staff member: .....

Position: .....

Years of service: .....

Signed: .....

Date: ...../...../.....

<b>Name of Child</b>	
<b>Name of Parent/Carer</b>	
<b>Address</b>	