

Supplementary Information Form (SIF)

This Supplementary Form should be completed by the parent/guardian of the child who is seeking admission to the school.

This form need only be completed to confirm and verify that you meet the requirements of the oversubscription criteria related to church attendance.

No additional information will be considered unless a family has attended more than one place of worship for that period, in which case more than one form may be submitted to cover the two years. It is the responsibility of the parent to get both sections complete and returned to school.

This form should be returned to the school office by no later than midnight on 14th January 2024

Section A: Application for admission to St John's CE Primary School			
Please consider the following information as part of the admissions process for the following child:			
Child's Surname		Forename	
Date of Birth			
Name of parent / guardian			
Address			
Postcode		Contact No	

<p>I confirm that my family worship at the heart of the Church named below;</p> <ul style="list-style-type: none"> We worship there at least twice a month; and have worshipped there for at least 2 years. <p><i>'In the event that during the period specified for attendance at worship the church has been closed for public worship and has not provided alternative premises for that worship, the requirements of these admissions arrangements in relation to attendance will only apply to the period when the church or alternative premises have been available for public worship'</i></p>

Place of Worship			
Name of Vicar / Priest / faith leader			
Address			
Postcode		Contact no	

Section B: Verification This section is to be completed by the above church leader			
Can you confirm that the church or place of worship given above is the applicant's regular place of worship and that the child/parent/guardian named above has attended public worship at church at least twice a month for the past two years.			Yes / No
Please indicate any further information which may be relevant to this applicant			
Name:			
Signed:		Date:	