The Church of England Diocese of Sheffield

SUPPLEMENTARY INFORMATION FORM TO MAKE AN APPLICATION FOR A CHURCH OF ENGLAND AIDED SCHOOL OR ACADEMY.

Please write clearly in block capitals, ensure that you have completed all the relevant parts of the form and return it to the Admission Team, Children and Young People's Services, Riverside House, Main Street, Rotherham S60 1AE before the closing date of **15 January 2019**.

Name and DOB of pupil for whom the application is made					
1	Please tick one box from those below to indicate your child's faith or religion				
Christian Please state denomination (see definition – www.churches-together.org.uk)					
Othe	ther Faith Please State				
2	If appropriate, please name your present parish/place of worship				
3a	Is this application supported by a regular pattern of worship by parents/carers and/or the child as defined in the school's admission policy?				
	Yes No				
3b	If yes please complete the Minister's Reference Form over this page and the	en ask your Minister of Religion to countersign it.			
4	For those applying for a school place at Dalton Trinity Croft Church of England School please state if your child has been baptised				
	Yes No				
Full name and signature of person(s) completing this form					
Name Date					
Signature					
MINISTER OF RELIGION REFERENCE FORM					
Name of child					
Name(s) of Parent(s)/Carer(s)					
Address of Parent(s)/Carer(s)					

In considering church school admission applications, priority is given to those who can prove a long-standing and regular pattern of attendance for worship at a public place of worship as defined in the school's Admissions Policy. Some schools make a distinction between attendance of Parent(s)/Carer(s and attendance of the child (see the school's Admissions Policy).

The Parent(s)/Carer(s should complete the details below at EITHER Section 1(a) OR 1(b) and then ask their Minister of Religion to countersign the form at Section 2.

SECTION 1

EITHE	R (a)	I/We the Parent(s)/Carer(s of	
have w	orshipped	at the church of	
for			for the last
	(insert f	requency, eg twice a month)	(insert length of time eg 2 years).
Signatu	ure (Paren	t/Carer)	Date
OR	(b)	My/Our child (name of child)	
has wo	rshipped a	at the church of	
for at least			for the last
	(insert f	requency, eg weekly)	(insert length of time eg 6 months).
Signature (Parent/Carer)		t/Carer)	Date
unders	stand that formation	I must notify the Admissions Team	the school and that the information I have provided is correct. In immediately if there is any change to these details and that, should e; the governing body may withdraw any offer of a place even if the
Signed			Date
SECTIO		Please check the Admission's Po	licy of the school
I confir	m that the	above statement is correct	
Name	of Minister		
Addres	s		
			Telephone Number
Signatu	ure (Minist	er of Religion)	Date
FOR S	CHOOL U	ISE ONLY	
Date R	eceived		