## 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 attach it to your online application or 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 2020**.

| Nan   | ne and DOB of pupil for   | whom the application is r | nade                    |   |  |  |  |
|---|---|---------------------------|-------------------------|---|--|--|--|
| 1   | Please tick one box from those below to indicate your child's faith or religion   |                           |                         |   |  |  |  |
| Christian Please state denomination (see definition – www.c |   |                           | urches-together.org.uk) |   |  |  |  |
| Oth   | er Faith  | Please State              |                         |   |  |  |  |
| 2   |   |                           |                         |   |  |  |  |
| 3a  | a 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 | then ask your Minister of Religion to countersign it. |  |  |  |
| 4   | For those applying for a school place at <b>Dalton Trinity Croft Church of England School</b> please state if your child has b baptised         |                           |                         |   |  |  |  |
|   | Yes   | No                        |                         |   |  |  |  |
| Full  | name and signature of   | person(s) completing this | form                    |   |  |  |  |
| Name  |   |                           |                         | Date  |  |  |  |
| Sigr  | nature  |                           |                         | _   |  |  |  |
| MIN   | ISTER OF RELIGION F   | REFERENCE FORM            |                         |   |  |  |  |
| Nan   | ne of child   |                           |                         |   |  |  |  |
| Nan   | ne(s) of Parent(s)/Caren  | (s)                       |                         |   |  |  |  |
| Add   | ress 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**

| EITHER                   | (a)        | I/We the Parent(s)/Carer(s of |                                      |  |
|--------------------------|------------|-------------------------------|--------------------------------------|--|
| have wor                 | shipped    | at the church of              |                                      |  |
| for                      |            |                               | for the last                         |  |
|                          | (insert fr | equency, eg twice a month)    | (insert length of time eg 2 years).  |  |
| Signature (Parent/Carer) |            |                               | Date                                 |  |
| OR                       | (b)        | My/Our child (name of child)  |                                      |  |
| has wors                 | hipped a   | t the church of               |                                      |  |
| for at least             |            |                               | for the last                         |  |
|                          | (insert fr | equency, eg weekly)           | (insert length of time eg 6 months). |  |
| Signature (Parent/Carer) |            |                               | Date                                 |  |

The data on this form will only be used within the school's admissions system which includes the Local Authority Admission Team, and will not be divulged to any third party outside the school's admissions system in accordance with current Data Protection legislation.

I confirm that I have read the Admissions Policy of the school and that the information I have provided is correct. I understand that I must notify the Admissions Team immediately if there is any change to these details and that, should any information I have given prove to be inaccurate; the governing body may withdraw any offer of a place even if the child has already started school.

Signed.....

Date.....

## SECTION 2 Please check the Admission's Policy of the school

I confirm that the above statement is correct

Name of Minister

Address

Telephone Number

Date

Signature (Minister of Religion)

FOR SCHOOL USE ONLY

Date Received -----/-----/-----