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**The Church of England Diocese of Sheffield**

Additional Information

to make an Application for a Church of England Aided School or Academy

**PLEASE COMPLETE IN BLOCK CAPITALS Name of Pupil** for whom application is made

...............................................................

1. Is the application for a local school?  YES  NO

2a.  Are you a member of a Christian Denomination/World Faith?  YES  NO

2b.  If yes please name the Christian Denomination/World Faith. .....................................................

3a.  If appropriate, please name your present parish/place of worship

 ...............................................................................................................

3b.  How frequently have you attended this place of worship and for how long? ……………………………….

4. Is this application made because you want a Christian education for your child?

(Because you want your child to be educated within a Church of England School?)

 YES  NO

5a.  Is this application being made because of a regular pattern of worship by parents/carers (at least once a month over the past two years) or by the child him/herself (at least once a month over the past twelve months)?

 YES  NO

5b.  If yes please complete the Minister’s Referral form over page and then ask your minister of religion to countersign it.

**Full Name and signature of person(s) completing this form:**

**Name** ..........................................................**Signature** .....................................................

**PRIMARY FORM -----------**

In determining faith admission applications priority is given to:-

a)  those children whose parents/carers can prove a long-standing and regular pattern of worship at any public place of worship. This is defined as worship by at least one parent/carer at least once a month over the last two years.

b)  Those children who have attended on average once a month a place of public worship (e.g. church, Sunday School, Mosque, Temple.)

**In the event that during the period specified for attendance at worship the church [or, in relation to those of other faiths, relevant place of worship] 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 in relation to those of other faiths, relevant place of worship] or alternative premises have been available for public worship.**

Minister of Religion Referral Form

**Name of child**: .................................................................................................................

**Name(s) of parent/carer** ....................................................................................................

**Address of parent/carer** ....................................................................................................

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In determining faith admission applications priority is given to:-

a)  those children whose parents/carers can prove a long-standing and regular pattern of worship at any public place of worship. This is defined by the Diocese as worship by at least one parent/carer at least once a month over the last two years. Please consult the individual school’s admission policy to check for any variation.

b)  Those children who have attended on average once a month a place of public worship (e.g. church, Sunday School, Mosque, Temple.)

**In the event that during the period specified for attendance at worship the church [or, in relation to those of other faiths, relevant place of worship] 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 in relation to those of other faiths, relevant place of worship] or alternative premises have been available for public worship.**

**The parent(s)/carer(s) are asked to complete the details below at Section 1 and then ask their minister of religion to countersign the form at Section 2.**

**Section 1**

a)  I/we the parent/carer(s) of .......................................have worshipped at least once a month

for the last …....... months at ........................................................................................................

b)  Our child (name of child) .......................................... has worshipped at least once a month

for the last …………. months at …………………………………………………………………………………………………..

**Signed** (parent/carer) ........................................... **Date** .......................................

**Section 2**

**Countersign by minister of religion** .................................................. Date ......................................

Name of minister of religion ...................................................... Tel Number ...........................................

Address ........................................................................................................................................................

Any other comments ....................................................................................................................................

***Thank you for your help***