

THE CHURCH OF ENGLAND DIOCESE OF SHEFFIELD

**SUPPLEMENTARY INFORMATION TO MAKE AN APPLICATION FOR A
CHURCH OF ENGLAND AIDED SCHOOL 2020-2021**

Please complete in block capitals and return to the school directly. Each voluntary aided school you apply for will need a completed supplementary information form.

Please tick the school(s) which you are applying for:

Elsecar Holy Trinity CE
Primary Academy

The Ellis CE Primary
School

Tankersley St Peter's CE
Primary School

Name of pupil for whom application is made _____

Date of birth _____

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)

Other Faith

Please state _____

2 If appropriate, please name your present parish/place of worship _____

3(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

3(b) If yes, please complete the Minister's Reference Form over this page and then ask your Minister of Religion to countersign it.

Full name and signature of person(s) completing this form.

Name _____ Signature _____

Date _____

Please securely staple to the completed Common Application Form

Please turn over

MINISTER OF RELIGION REFERENCE FORM

Name of child: _____

Name of parent/carer _____

Address of parent/carer _____

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/carer(s) of _____

have worshipped at the Church of _____

for _____ for the last _____ .
(insert frequency, eg twice a month) (insert length of time, eg 2 years)

Signature (Parent/Carer) _____ **Date** _____

Or (b) My/Our child (name of child) _____ has worshipped

at the Church of _____ for at least _____
(insert frequency, eg weekly)

for the last _____ .
(insert length of time, eg 6 months)

Signature (Parent/Carer) _____ **Date** _____

SECTION 2 Please check the Admissions Policy of School

I confirm that the above statement is correct.

Name of Minister _____

Address _____

Telephone Number _____

Signature _____ **Date** _____

(Minister of Religion)