

## St Mary's C of E Primary School

Headteacher: Mrs M. Constantinou BEd Littlegrove, East Barnet, Herts EN4 8SR t: 020 8449 5856

e: office@stmarysen4.barnetmail.net www.stmarysen4-barnet.co.uk

## SUPPLEMENTARY INFORMATION FORM

(FOR APPLICANTS UNDER OVERSUBSCRIPTION CRITERIA 4/5/6)

Parents should fill in this form when applying for a place at the school and should ensure that they have read the admission policy prior to completing the form and returning it to the school office

| Total the daminosist perior to complete the total time to the control of the cont |                |                                     |                |  |  |
|--|----------------|-------------------------------------|----------------|--|--|
| Pupil Information  |                |                                     |                |  |  |
| Surname of child:  | •              |                                     |                |  |  |
| First name(s) of child   |                |                                     |                |  |  |
| Date of birth:   |                |                                     |                |  |  |
|  |                |                                     |                |  |  |
| Parent/Carer Information   |                |                                     |                |  |  |
|  | Parent/Carer 1 |                                     | Parent/Carer 2 |  |  |
| Name of Parent/Carer:  |                |                                     |                |  |  |
| Home address:  |                |                                     |                |  |  |
| Home telephone:  |                |                                     |                |  |  |
| Daytime telephone (if different):  |                |                                     |                |  |  |
| Mobile:  |                |                                     |                |  |  |
| Email:   |                |                                     |                |  |  |
|  |                |                                     |                |  |  |
| Church Information   |                |                                     |                |  |  |
| Which church category are you applying under?  |                |                                     | ☐ Criteria 4   |  |  |
|  |                |                                     | ☐ Criteria 5   |  |  |
|  |                |                                     | ☐ Criteria 6   |  |  |
| Name of church(es) attended:   |                | Denomination of church(es) attended |                |  |  |
|  |                |                                     |                |  |  |
| Please ask your Priest/Minister to complete the declaration overleaf in order to confirm your church attendance.   |                |                                     |                |  |  |
| Signed:  |                |                                     | Date:          |  |  |
| Name (parent/carer):   |                |                                     |                |  |  |
|  |                |                                     |                |  |  |

| Declaration   |       |      |  |  |  |
|---|-------|------|--|--|--|
| Name of Priest/Minister completing this declaration:  |       |      |  |  |  |
| Name and address of place of worship:   |       |      |  |  |  |
|   |       |      |  |  |  |
|   |       |      |  |  |  |
| Is your church Anglican?  | ☐ YES | □ NO |  |  |  |
| If no, is your church a member of Churches Together in England?   | ☐ YES | □ NO |  |  |  |
| The attendance requirements set out in the Admissions Policy are:  • Regular frequent attendance on at least two Sundays per month for the previous two years |       |      |  |  |  |
| Regular frequent attendance on at least two bandays per month for the previous two years  |       |      |  |  |  |
| Has one or more of the child's parents/carers attended your church on at least 2 Sundays per month for the previous two years prior to this declaration?      | ☐ YES | □ NO |  |  |  |
| If no, please set out the period and frequency of attendance below:   |       |      |  |  |  |
|   |       |      |  |  |  |
|   |       |      |  |  |  |
| O' I CD : I/M: : I  | 15.1  |      |  |  |  |
| Signature of Priest/ Minister:  | Date: |      |  |  |  |
|   |       |      |  |  |  |
|   |       |      |  |  |  |
| Previous Church Attendance Declaration  Note to parents/carers: If you previously attended another church (within the required attendance                     |       |      |  |  |  |
| period) please also ask your previous priest/minister  Name of Priest/Minister completing this declaration:   |       |      |  |  |  |
| ·   |       |      |  |  |  |
| Name and address of place of worship:   |       |      |  |  |  |
|   |       |      |  |  |  |
| Is your church Anglican?  | ☐ YES | □ NO |  |  |  |
| If no, is your church a member of Churches Together in England?   | ☐ YES | □ NO |  |  |  |
| Please confirm the length of time during which one or more of the child's parents/carers attended your church and how frequently they attended:               |       |      |  |  |  |
| Charon and now nequently they attended.   |       |      |  |  |  |
|   |       |      |  |  |  |
|   | ,     |      |  |  |  |
| Signature of Priest/ Minister:  | Date: |      |  |  |  |
|   |       |      |  |  |  |