



Ashford Church of England Primary School Supplementary Information Form

Details of Child

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| Forename (s): | Surname: |
| Date of Birth: | Gender: |
| Home Address: | |
| Postcode: | |

Details of Parent/Carer

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| Title: | Forename: | Surname: |
| Home Address (if different from above, for communication purposes only): | | |
| Postcode: | | |
| Daytime Contact No: | | Evening Contact No: |
| Signature: | | Date: |

Please only complete the section below and arrange for the incumbent's signature if you wish to register a church connection with your application for Criteria 4a-4c. Verification will be sought by the Governors' Admissions Committee.

Parish/Church or Place of Worship

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|---|--|
| Church/Place of Worship attended by Parent: | Address: |
| Do you attend at least twice a month YES/NO | Have you been attending this church for at least 2 years prior to this application? YES/NO <i>N.B. In the event that during the period specified for attendance at worship the church 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 alternative premises have been available for public worship.</i> If No, please complete a further form with details of the church you were attending. |

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| Name of Vicar/Minister/Priest: Signature of Vicar/Minister/Priest: | Official Church Stamp |
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Please only complete the section below and arrange for the headteacher's signature if you wish to register as a qualifying member of staff with your application for Criteria 5. Verification will be sought by the Governors' Admissions Committee.

Children of Staff

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|---|--------------------------|
| I have worked at Ashford CE Primary School since (Date) | |
| I am joining Ashford CE Primary to fill a vacancy for which there is a demonstrable skills shortage | <input type="checkbox"/> |
| Name: Signature: | |
| Headteacher's Signature | |