

SUPPLEMENTARY INFORMATION FORM FOR ADMISSION TO
RECEPTION CLASS SEPTEMBER 2023
ST. MARY'S C.E. PRIMARY SCHOOL, HIGH CROMPTON



The responsibility for returning the completed form to school rests with the parent or legal guardian.

PART A - To be completed and signed by the Parent or Legal Guardian

Child's Surname.....	
Child's Forename/s.....	
Date of birth	Boy <input type="checkbox"/>
	Girl <input type="checkbox"/>
Parent/Legal Guardian/s' Names	
Address.....	
..... Post Code	
Contact Number (between the hours of 9am to 4pm)	
Does your child have any medical or social circumstances that can only be met at St Mary's C. E. Primary School High Crompton? <i>(see explanatory note 'b' of the School Admissions Policy)</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, separate documentary evidence must be provided to the school.	
Has your child a sibling who will be on roll at St Mary's C. E. Primary School High Crompton on the date of admission? <i>(see explanatory note 'c' of the School Admissions Policy)</i>	YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, siblings' name and date of birth	
Church Attendance Please read the guidance on the next page If you would like your application to be considered under criteria 4, 5 or 7 of the School Admission Policy please arrange for the remainder of this form to be completed by your vicar/ minister/ priest/pastor/or leader of worship. (If you have attended at more than one church then please arrange for a form to be completed and signed by a leader of worship from each church)	
Data Protection (GDPR) All information provided will remain confidential and will be used solely by the School Governing Body for the school admission process. The information is not shared with any third party except in the event of an appeal. Supplementary Information forms are held confidentially and securely in the School Office. If the child is admitted to the school the form is added to the pupil record and retained whilst the child is at the school. If the child is not admitted then this form will be retained for a period of one year from the closing date of applications then securely destroyed (shredded).	
Signed.....Parent/Legal Guardian Date.....	

**PLEASE RETURN TO SCHOOL BY 15 JANUARY 2023 – YOU MUST OBTAIN
A RECEIPT**

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PART B – To be completed by the vicar/minister/priest/pastor or leader of worship at the church you have attended

Child's Name			Date of Birth.....		
Child's Address					
Name of place of worship regularly attended by one of the parents/legal guardians and the child					
.....					
Address.....					
Please answer the 2 questions below by ticking one box and initial at the side of the tick so that there can be no misunderstanding. Please do not amend the statements in any way.					
1) Which of the categories most closely describes the applicant?			<input type="checkbox"/>		
Members of St Mary's Church High Crompton, Holy Trinity Shaw or Thornham St James			<input type="checkbox"/>		
Members of another Anglican Church			<input type="checkbox"/>		
*Members of a Christian church of another denomination			<input type="checkbox"/>		
<p>*Christian church means any church which is designated under the Ecumenical Relations Measure nationally by the Archbishops of Canterbury and York or locally by the diocesan bishop, or is a member of Churches Together in England, or the Evangelical Alliance, or a partner church of Affinity. The list of nationally Designated churches can be found at https://www.churchofengland.org/sites/default/files/2019-12/Designated%20Churches.pdf</p>					
2) Have one parent/legal guardian and the child attended public worship at church during the year 1 December 2021 – 30 November 2022?					
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
40 plus weeks during the 12 month period		25 - 39 weeks during the 12 month period		10-24 weeks during the 12 month period	
To be signed by vicar, minister, priest, pastor or leader of worship at the church(es) you have attended					
Signed.....					
Print Name					
Position in church.....				Date	
To be signed by parent/legal guardian					
Signed.....					
Print Name.....				Date.....	
For School use only					
Date completed form received			Receipt issued		

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