



2018/2019 Application

Tick the Year Group you are applying for:

Nursery

Reception

Other Year Group (specify) _____

Parent: Complete Section A

Give your completed form to your priest or minister. Ask them to complete Section B and stamp. Deliver both sections to the **Grove Site School Office**. Receive confirmation slip of receipt. We do not accept SIF's via email.

Please note the Office WILL NOT accept Supplementary Information Forms for Nursery or Reception 2018/19 applications before 1st September 2017.

SIF Section A (completed by Parent)

Child's First Name		Address	
Child's Surname		Postcode	
Date of Birth		Telephone	
Parent Name		Mobile	

Names of Siblings at School		Year Group of Siblings	
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Church Attended		Date of Child's Baptism	
Denomination		Church Baptised	

Parent Sign		Date of Signing	
Print Name		<i>School Use Only:</i>	

*When you submit this form, attach a photocopy of the Child's Baptismal Certificate



THE CHURCH OF ENGLAND

CHRIST THE SAVIOUR SCHOOL

EALING, LONDON. W5 5DX

www.ctsprimary.org.uk

Supplementary Information Form



Section B

Must be completed by the Priest/Minister

For those who are **not** Church of England clergy, this form should be completed by the equivalent clergy/minister.

Child's Name		Church Name	
Denomination		Church Address	
Date of Child's Baptism		Church Postcode	
Name of Vicar		Church Telephone	

1. Denomination and Years/Months Worshipping

Tick One

Church of England	<input type="checkbox"/>	Affiliated to Evangelical Alliance	<input type="checkbox"/>
Affiliated to Churches Together in Britain & Ireland	<input type="checkbox"/>	Affiliated to other Faith Group	<input type="checkbox"/>
Other Faith Group/ World Religion*	<input type="checkbox"/>	Specify World Religion:	<input type="text"/>

2. Length of Time Worshipping at Church Above

Years	<input type="text"/>	Months	<input type="text"/>
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3. The parent(s) has attends and worships at this church:

Weekly	Twice Month (Minimum attendance for ranking under criteria 2 to 7)	Once a Month or Occasional Attendance
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. At least one parent is a member of the electoral roll or church membership list

Yes No

5. Please list recognised positions of responsibility or involvement within the church:

6. Clergy Reference/ Comments and stamp:

Signed:	<input type="text"/>	Date:	<input type="text"/>
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