**Crosby Ravensworth Church of England Voluntary Aided Primary School.**

Supplementary form to be used if you wish your application for admission to be considered on faith grounds.

Name of your child:-

Surname\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forenames\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Date of Birth\_\_\_\_\_\_\_\_\_\_ Boy Girl

Name of parent(s)/carer(s)/guardian(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Post Code \_\_\_\_\_\_\_\_ Telephone Number (daytime contact)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The name of an older sibling who will still be attending our School at the date of the

proposed admission. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The place(s) of Worship attended by at least one parent and the named child.

The name of the place(s) of Worship. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The name of the Vicar/Priest/Minister/Faith Leader \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address + Postcode \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Worship Attendance:

How frequently do you attend worship with your child?

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Weekly Fortnightly

For how long have you been so attending?

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One Year Two Years Three Years or more

Your Church leader will be contacted to confirm the details on this form.

Signed (Parent/Carer/Guardian) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_