St Peter's C of E Primary and Nursery School

Supplementary Information Form

You should complete this form if you are applying for a place at St Peter's School. This supplementary form must be completed in addition to the common application form.

Please complete this form and return to the School Office.

Child's Surname: …….

Child' Christian Name(s): …….

Child's Date of Birth: …….

Parent/Carer's Name: …….

Parent/Carer's Address: …….

…….

Post Code: …….

Telephone Number: …….

In Which Parish Do You Live: …….

Church Attended: …….

Please Give the Name And Address of a Priest/ Minister to Whom Reference May be Made: ……...

Have You Worshipped at Least Once a Month for The Previous 12 Months: Yes/No

Signed (Parent/Carer): _____