Pierrepont Gamston Primary School

(Voluntary Aided Church School)

Coledale, West Bridgford, Nottingham NG2 6TH Tel: 0115 981 9292 Fax: 0115 982 7182 Email: office@pierrepont-gamston.notts.sch.uk



SUPPLEMENTARY APPLICATION FOR FOR THE SCHOOL YEAR 2017/2018

NOTES

- 1. All applications to the school are initially made using the standard Local Authority preference form, and are treated as applications for a Community place.
- 2. This supplementary form should be completed only if you are applying for a Foundation Place. The Governors will use the supplementary information regarding your family's church attendance and commitment over a sustained period of time (at least two years) to help them consider your application for a Foundation Place.
- 3. Before completing this Supplementary Application Form you should read the "Admissions" page on the school website which describes the arrangements for the school year 2017/2018. Where there are more applicants than places available, School Governors will operate the criteria set out in that document. It is, therefore, essential that you answer all the questions on this form so that Governors can deal fairly with your application on behalf of your child.
- 4. When completed, this form should be returned to this school by no later than the 15th January 2017.
 The Governors will consider the application by applying the published criteria, and the Local Authority will inform you of the decision on the standard date 18th April 2017.
- 5. If you have any difficulties in the completion of this form, you are asked to contact either the Head Teacher or the Chair of the Governing Body who will be able to help.
- 6. A large print version of the form is available on request from the School Office.

1.	Child's full name	
2.	As Parents or Guardians, are you and your child(ren) regular and frequent (once a month) active members of any Church within Churches Together in The Evangelical Alliance?	
	If the answer is "YES", please give the name and location of your Church.	123 / 110

3.	Over the worship?	•	wo years, approxii	mately how often h	nave you c	ittended a place of		
	WEEKLY		FORTNIGHTLY	□ MONTHLY		OCCASIONALLY		
4.	Please give the name, address, telephone number and email address of your Priest, Church Minister or similar leader, who will be asked to comment on this application.							
<u>Name</u>								
Ado	Address							
<u>/ .c.</u>	<u> </u>							
Telephone Number								
Email address								
<u></u>	dii d.c.c. c :	<u> </u>						
As parent(s) of the above named child, I/ we hereby make an application for a 2017/2018 Foundation Place in Pierrepont Gamston Primary School (Voluntary Aided Church School) in accordance with the current information on admissions published by the School Governors on the school website.								
Prin	nt Name _			Signe	d	Date		
Sch	nool Use	Date (of Receipt	Signo	ature			
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