



Farnfield St Michael's C of E Primary school (V.A.)
Branston Ave
Farnfield
Newark
Notts NG22 8JZ
01623 882494
office@st-michaels.notts.sch.uk

SUPPLEMENTARY INFORMATION FORM
2020/2021

Surname: _____ Child's Christian Name(s): _____

Date of Birth: _____

Address: _____ Telephone Number: _____

Name of Parent or Carer: _____
.....
.....

Please read these questions carefully along with the accompanying information contained within our Admission Policy.

1. Do you regularly and frequently (monthly for at least a year) worship at a Church of England Church?

Yes / No* Please give details: _____

2. Do you regularly and frequently (monthly for at least a year) worship at any other Christian Church which is a member of Churches Together in England?

Yes / No* Please give details: _____

3. Does the above named child regularly and frequently (monthly for at least a year) attend a Christian Church which is a member of Churches Together in England?

Yes / No* Please give details: _____

You should also include a letter from your priest/minister to confirm the above statements.

(* Please delete as appropriate)

I apply for a place in accordance with the information on admissions published by the School Governors.

Signed

Date