



Supplementary Information Form

This form is for applicants who wish church commitment to be taken into consideration as part of their admissions application. The Supplementary Information Form must be completed **in addition** to the Local Authority's application form. Please complete and sign the form below and return it to the office at **St Mary Magdalene C of E Primary School**.

PART ONE – To be completed by a parent/carer:

Surname of child: _____ Date of birth: _____

Christian / Forename(s) of child: _____

Parent or Carer's Full Name: _____

Contact Information:

Home address: _____

_____ Postcode: _____

Tel No's: Home: _____ Work: _____

Mobile: _____ Email Address: _____

I have completed this supplementary form in good faith and am aware that the offer of a place may be revoked if any misrepresentation comes to light.

Signature: _____ Date: _____

Please take this form to a recognised leader in your Church/Parish, for example a Church Warden, so that they can verify your church commitment in the section below.



PART TWO – To be completed by a recognised leader of the Church/Parish:

Please confirm if the above parent/carer is:

A communicant member of St Mary Magdalene Church, Sutton in Ashfield and has attended worship at least twice per calendar month for the past two years. Please include week-day worship.

Yes No

Or

A communicant member of one of the churches named in the cluster: All Saints Huthwaite; St Andrew's Skegby; All Saints Stanton Hill; St Katherine's Teversal; St Michael's Sutton in Ashfield; and has attended worship at least twice per calendar month for the past two years. Please include week-day worship.

Yes No

Or attends:

A Church of England church, or a church that is a member of Churches Together in England' or the Evangelical Alliance or a Christian Church registered with the Charities Commission and has attended worship at least twice per calendar month for the past two years. Please include week-day worship.

Yes No

A place of worship which follows the teachings of one of the major worlds faiths (Buddhism, Hinduism, Islam, Judaism, Sikhism) and has attended worship at least twice per calendar month for the past two years. Please include week-day worship.

Yes No

Church/Place of Worship: _____

Signature: _____ Print name: _____

Position/Title in Church or Place of Worship: _____ Date: _____

Contact details:

Tel: _____ Email: _____

When PART TWO of this Supplementary Information Form has been completed, please return it to the office at St Mary Magdalene C of E Primary School.

