



Supplementary Admissions Information Form

This form is for applicants who wish church commitment to be taken into consideration as part of their application. The Supplementary Information Form must be completed in addition to the Local Authority's application form. Please ensure both parts are completed and signed and return it to **Magnus Church of England Academy**.

PART ONE - To be completed by parent or carer

Surname of child: _____ Date of birth _____

Christian / Forename(s) of child _____

Parent or Carer's Full Name: _____

Contact Information:

Home address: _____

_____ Postcode _____

Telephone: 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I have completed this supplementary form in good faith and am aware that the offer of a place may be withdrawn, if any information is found to be fraudulent or potentially misleading.

Signature: _____

Date _____

Please see next page for part 2



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

Please Note - Measurement of Attendance:

**** In the event that during the period specified for attendance at worship the church has been closed for public worship and has not provided alternative premises for that worship, the requirements of these [admissions] arrangements in relation to attendance will only apply to the period when the church or alternative premises have been available for public worship****

Please confirm if the child or parent/carer named on the form is:

i) **'At the heart of the Church'** – a regular, committed worshipper who has worshipped at least twice a month for 24 months prior to the date of application. Please include week-day worship.

Child

Parent

Yes No

Yes No

ii) **'Attached to the Church'** – a regular, but not frequent worshipper who has worshipped at least once a month for 24 months prior to the date of application. Please include week-day worship.

Child

Parent

Yes No

Yes No

Church/Parish: _____

Signature: _____

Print name: _____

Church Position/Title: _____ Date: _____

Contact details:

Tel: _____

Email: _____