



Linby-cum-Papplewick C.E. Primary School



Love Life
Love Learning
Grow in Faith

**Linby cum Papplewick
CE Primary School,
Quarry Lane,
Linby,
Nottingham
NG15 8GA**

Tel : 0115 9634282

Supplementary Application Form 2025-2026

This document must be filled in by the person with whom the child resides.

Family Name:	First Names:		
Address:		Post Code:	
Telephone No:		Date of Birth:	
Name(s) of person(s) making application:		Relationship to child:	
Do you live in the civil parish of Linby or Papplewick?			YES NO
Do you live in the Ecclesiastical (Church) Parish of Linby cum Papplewick?			YES NO

Please note it is important that the information requested below is given as comprehensively as possible because the application for a school place for your child can only be judged on the information provided and a Minister's reference if applicable.

a) Do you attend Church worship?	YES	NO	If <u>yes</u> : which Church?
b) Have you attended worship at least two Sundays a month throughout the previous year?	YES	NO	
c) Do you attend a different faith's place of worship?	YES	NO	If <u>yes</u> : which place of worship?
d) Please give the name and full address of your Faith Leader to whom we shall write for a reference to confirm the information you have given in this section. (If you are new to the area please give your previous Faith Leader's address.)			

- **Please enclose your child's Birth Certificate with this Application (not a photocopy).**
- **Proof of Residence is also required : if you drive, a current driving licence; plus one of the following – a council tax bill, a utility bill, a mortgage statement or an insurance statement.**

I / we confirm that the information provided is correct.

Signature(s):

Date of application: