Cotgrave Church of England Primary School

Head Teacher: Telephone: 0115 989 2204

The Cross, Cotgrave, Nottingham, NG12 3HS

Helen Pearson office@cotgrave.snmat.org.uk

# Supplementary Information Form

Child’s full name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Parent making the application: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please tick which one of the following statements most applies to you as parent/carer within the two years prior to the date of application:

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1. I am at the heart of the church (worshipping at least twice per month);

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1. I am attached to the church (worshipping monthly or involved in regular weekday church

 activities which include an element of worship);

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|   |

1. I am known to the church (worshipping at least once per year, known through a family connection or involved in a regular weekday church activity which does not include an element of worship);

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/means 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.

If you have ticked either 1, 2 or 3 above, please provide the name, title, address and telephone number on the lines below of a Priest, Church Minister or similar leader who could verify the statement you have selected. Please contact them before submitting the form to ensure that they know the form will be coming to them and so that they can accurately verify your chosen statement.

Parent/Carer Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Once completed please return the form to the Admissions Committee c/o School Business Manager at Cotgrave Church of England Primary School, The Cross, Cotgrave, NG12 3HS by 15th January who will pass the form on to the nominated Priest, Church Minister or similar leader for verification.

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FOR SCHOOL USE ONLY: (to be completed by nominated Priest, Church Minister or similar leader)

The statement selected above best describes the relationship of the parent/carer of this child to the church.

Priest/Minister’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Once completed please return the form to the Admissions Committee c/o School Business Manager at Cotgrave Church of England Primary School, The Cross, Cotgrave, NG12 3HS. If the statement selected by the parent/carer does not best describe their relationship to the church, please indicate which of the statements does best describe their relationship to the church.