

ST JOHN'S C.E PRIMARY SCHOOL, LEIGH

SUPPLEMENTARY FORM  
2018-2019

**N.B.**

**Please complete this form in addition to the Local Authority application which asks you to name your three preferences**

CHILD'S CHOSEN NAME:

CHILD'S LEGAL NAME: (If different from above):

DATE OF BIRTH:

HOME TELEPHONE NO:

ADDRESS (Including postcode):

PLEASE INFORM US OF ANY SIBLINGS (BROTHERS/SISTERS) ATTENDING ST JOHN'S C.E. PRIMARY SCHOOL AT THE TIME OF ADMISSION AND IN WHICH CLASS:

WORSHIP ATTENDANCE:

Are you and your child regular worshippers at St Mary's The Virgin Church (Leigh Parish)? *(Please circle as appropriate)*

Yes                      No

Are you and your child regular worshippers at any other Christian Church? *(Please circle as appropriate)*

Yes                      No

WORSHIP ATTENDANCE continued.....

If yes, please state name and telephone number of your minister/designated church officer and place of worship:

*We require evidence in the form of a written statement from your minister/designated church officer, confirming regular attendance, to consider the application under this criteria.*

Enclosure: Yes    No *(Please circle as appropriate)*

**BAPTISM**

**Has your child been baptised at St Mary's The Virgin Church (Parish Church)?**

**Yes    No (*Please circle as appropriate*)**

**If yes, please state date of baptism.**

**Date:**

**Please enclose a copy of baptism certificate.**

**Has your child been baptised at another Christian Church?**

**Yes    No (*Please circle as appropriate*)**

**If yes, please state date and place of baptism**

**Date:**

**Place:**

**Please enclose a copy of the baptism certificate.**

***Parents/Carers applying for a place under criteria 3, 4, 5 or 6 must complete this supplementary form IN ADDITION to the Local Authority application form.***