

This form is for completion, in addition to the Local Authority preference form, by applicants who wish to provide information for consideration under criterion 4, 5 6 7 or 8 of the school's oversubscription policy. It should be returned directly to Cronton C.E. Primary School by the closing date of 15^{th} January 2019.

NB This form will be disregarded if the applicant does not also name Cronton C.E. Primary School as a preference on the Local Authority preference form.

PART A
Child's Surname
Child's Forename(s)
Home Address
Post Code Tel:
Date of Birth
Name of parent who is providing the information about religious practice:-
Please answer the question(s) relating to the criterion/criteria for which you wish to provide information: Criterion 4
Do you attend worship at Cronton Mission Church?
Yes No D
If yes, please request the vicar/minister to complete part B of this form
Criterion 5
Do you attend worship at St Lukes Farnworth, St. Johns Widnes or St. Ambrose Widnes (East Widnes
Team)
Yes 🔲 No 🔲
If yes, please request the relevant faith leader to complete part B of this form
Criterion 6
Do you attend worship at any other Anglican Churches?
Yes 🔲 No 🔲
If yes, please request the relevant faith leader to complete part B of this form
<u>Criterion 7</u>
Do you attend worship with any other Christian Denomination?
Yes 🔲 No 🔲
If yes, please request the relevant faith leader to complete part B of this form
Criterion 8 Deer your shild attend Creater CE Nurgery 2
Does your child attend Cronton CE Nursery? Yes No
If yes, please specify the date your child started
21 yes, preude specify the dute your child started
I have read the current Admissions Policy of the school and confirm the information I have provided to
be correct.
Signature of Parent
NOTE: Because the number of applications for places at the school may exceed the number of places

NOTE: Because the number of applications for places at the school may exceed the number of places available, the Governors regret that completion of this form does not guarantee that a place will be offered to your child.



<u>PART B</u>

Form for admission to Cronton C. E. Primary School, September 2019

To be completed by the priest/vicar/minister of the supporting church in relation to the parent of the child named overleaf:

ame of Priest/vicar/minister
ame of Church
ddress
el:
ease delete as appropriate: NB Please complete the form with reference to Parent named verleaf.
he Parent currently attends this church Yes \square No \square he Parent attends at least monthly Yes \square No \square he Parent has attended at least monthly for 12 months prior to 15 th January 2019.
Yes □ No □
have checked the information herein and can verify that this family have orshipped at this church for a minimum of monthly since January 2018.
ignature of priest/vicar/minister
By signing this form you are verifying that you have checked that the above formation is correct at the date of signature.).
ate:
he Governors of Cronton Church of England Primary School thank you for taking

g the time to complete this form.

Please return this completed form to the Parent who is requested to return it to school by 15th January 2019.