



Cronton C. E. Primary School

Application for Admission - Supplementary Form - September 2017

*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<sup>th</sup> January 2017.*

*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

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

Criterion 7

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

Does your child attend Cronton CE Nursery?

Yes  No

If yes, please specify the date 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 available, the Governors regret that completion of this form does not guarantee that a place will be offered to your child.



**PART B**

Form for admission to Cronton C. E. Primary School, September 2017

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

Name of Priest/vicar/minister \_\_\_\_\_

Name of Church \_\_\_\_\_

Address \_\_\_\_\_

Tel: \_\_\_\_\_

*Please delete as appropriate: NB Please complete the form with reference to Parent named overleaf.*

The Parent currently attends this church    Yes        No   

The Parent attends at least monthly        Yes        No   

The Parent has attended at least monthly for 12 months prior to 15<sup>th</sup> January 2017.

Yes        No   

**I have checked the information herein and can verify that this family have worshipped at this church for a minimum of monthly since January 2016.**

**Signature of priest/vicar/minister \_\_\_\_\_**

*(By signing this form you are verifying that you have checked that the above information is correct at the date of signature.)*

**Date: \_\_\_\_\_**

**The Governors of Cronton Church of England Primary School thank you for taking the time to complete this form.**

**Please return this completed form to the Parent who is requested to return it to school by 15<sup>th</sup> January 2017.**