



Christ the Saviour School
EALING, LONDON. W5 5DX
www.cts-primary.org.uk 020 8249 6800
Supplementary Information Form (SIF)
2018/19 Admission Round



Tick the Year Group you are applying for:

Nursery Class Reception Class Other Year Group (specify): _____

Section A

This page of the application should be completed by the parent

Child's First Name		Address	
Child's Surname		Postcode	
Date of Birth		Telephone	
Parent Name		Mobile	

Names of Siblings at School		Year Group of Siblings	
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Church Attended		Date of Child's Baptism	
Denomination		Church Baptised	

Parent Sign		Date of Signing	
Print Name			

When you have completed Section A:

1. attach a photocopy of the **Child's Baptismal Certificate** (or equivalent)
2. Give your completed form to your priest (or equivalent) and **ask them to complete Section B** (overleaf)
3. Make sure your **form is stamped** (or a supporting letter on headed paper or similar is provided)
4. Deliver Section A, Section B and a copy of the child's baptismal certificate to the **Grove Site School Office**
5. **You will be given a receipt by the office when you submit your application**

We WILL NOT accept Supplementary Information Forms before 1st September in the year before you are applying for admission to Nursery or Reception. Other year group applications are received all year.



Section B

This page must be completed by the Priest (or equivalent)

Child's Name		Church Name	
Denomination		Church Address	
Date of Child's Baptism		Church Postcode	
Name of Vicar		Church Telephone	

1. Denomination Tick One- membership must be active or this section will be invalid

1. Church of England	<input type="checkbox"/>	3. Affiliated to Evangelical Alliance	<input type="checkbox"/>
2. Affiliated to Churches Together in Britain & Ireland	<input type="checkbox"/>	4. Affiliated to other Faith Group	<input type="checkbox"/>
5. Other Faith Group/ World Religion*	<input type="checkbox"/>	Specify World Religion:	

2. Length of Time Worshipping at this Church

Years	<input type="text"/>	Months	<input type="text"/>
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3. The parent(s) attends services and worships at this church:

Usually Weekly	Twice a month	Occasionally <small>*please note that twice monthly attendance is required for consideration as a regular attender</small>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. If Church of England, at least one parent is a member of the electoral roll or church membership list

Yes No N/A

5. Please list recognised positions of responsibility, or active involvement, within the church:

7. Clergy name, signature and stamp:

Date:	<input type="text"/>
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