



THE GOVERNORS
of the
THE EDWARD BETHAM CHURCH OF ENGLAND PRIMARY SCHOOL



**SUPPLEMENTARY INFORMATION FORM
FOR A PLACE AT THE EDWARD BETHAM CHURCH OF ENGLAND PRIMARY SCHOOL
(THIS IS NOT AN APPLICATION FORM)**

Please complete this Supplementary Information Form in **BLOCK** letters.
The form will then need to be taken to your clergy, minister or religious leader to complete if appropriate.

Please note it is essential that a Common Application Form is also completed. It is preferable that this is done on-line and can be accessed at www.ealing.gov.uk/admissions. However, a paper copy can be obtained from the London Borough of Ealing and once completed, should be returned direct to them. Please confirm that you have completed a Common Application form and supply the reference number below:

CAF reference Number _____

THIS SECTION SHOULD BE COMPLETED BY ALL APPLICANTS

Name of child (please underline the family name)

Male Female (Please tick)

Child's date of birth: Date you wish child to be admitted

Name of parent(s) or guardian(s)

Address of parent(s) or guardian(s)

.....

Telephone numbers Day Evening

Mobile

SUPPLEMENTARY INFORMATION SECTION

Other information: I/We would like the Governors to take into account the following **medical** or **social** needs of the child, and we **enclose** documentary evidence from a Consultant or Social Worker of the need: (please continue on an extra sheet of paper if necessary). It is essential that as much information is provided at the time of application – information submitted after the closing date cannot be considered.

.....
.....

I/We have other children present at The Edward Betham Church of England Primary School and who will be attending after the admission date of this application: (please specify name(s) and classes)

.....
.....

RELIGIOUS AFFILIATION

I/We (Name of Parent/Guardian)
attend (please give below the name and address of your church or other place of worship)
.....
.....

I/We attend this place of worship Weekly Fortnightly Monthly Festivals only

How long have you attended? At least one year Yes No (please tick)

PLEASE SIGN BELOW TO SAY THAT YOU HAVE READ AND UNDERSTOOD THE ADMISSIONS POLICY AND NOTES:

Signed Date

(Parent/Guardian)

This Section to be completed by the Clergy, Minister, or Religious Leader of the applicant:

I (please print).....agree/do not agree* with the assessment made by the applicant(s). This information will be available to the applicants. (*Please delete as appropriate).

Please comment if necessary:

For Christian referees:

Is your Church/Denomination in full membership of:

The National **Churches Together in England (CTE)?** Yes No (Please tick)

The **Evangelical Alliance?** Yes No

Signed Name

Position Held Telephone Number.....

Religious organisation Date

Where possible please endorse with official stamp.

To the Clergy/Minister/Religious Leader:

Please return this form to The Clerk to the Governors (Admissions) at The Edward Betham Church of England Primary School, Oldfield Lane South, Greenford, Middlesex. UB6 9JU.