

## St. Paul's C of E (Aided) Primary School

## SUPPLEMENTARY INFORMATION FORM

For Office Use Only Year Group:

Criteria:

Distance:

BLUCK CAPITALS PLEASE	(1 nis jorm musi ve compiei	ea in addition to the Surrey Appli	cauon Form)
CHILD'S SURNAME		FIRST NAMES	
DATE OF BIRTH		Male / Female	
		f a place is offered)	
		TEL:	
PARENT'S / GUARDIAN'S N	AME		
Signed		Date	
	For completion in re.	spect of criteria 5&6 only:*	
PLACE OF WORSHIP (please	state name of minister and c	church address)	
another Christian church that is a m 6) at least twice a month for a minin during the one-year period precedin churches during the period in quest public worship and has not provided	ember of Churches Together in num of one year immediately bei ig the date of application must pi ion. In the event that during the p I alternative premises for that wo	ho with their parent(s) worship at St Pai Britain and Ireland and/or a member of fore the date of application. An applicar rovide evidence of the same pattern of period specified for attendance at worsh orship, the requirements of these [admis- tive premises have been available for pa	the Evangelical Alliance (criterion at who has moved into the area attendance at a previous church on hip, the church has been closed for assions] arrangements in relation to
I confirm that			
		Parent(s) / Guardian(s)	
and	(child's name) me	eet-the above requirement for church	ch attendance.
	Priest / Minister	Date	
Official church stamp			

Please see our Admissions Policy for details of how applications are considered in the event of over-subscription for places. It is available on our website www.stpaulsschool-dorking.co.uk