SCHOOL ADMISSIONS SUPPLEMENTARY FORM ST. MICHAEL'S C.E. (AIDED) PRIMARY SCHOOL

Please complete this form if you are applying for a place under faith criteria.	
Surame of child:	Christian names:
Date of Birth:	
Name of parent(s):	
Address:	
Contact telephone	e-mail address
Place of worship one of the parents regular	ly attends:
Name of place of worship:	
Address:	
Name of vicar/priest/minister/faith leader	۰۰
Address:	
Post Code:	. Telephone:
Date of Baptism/Infant Dedication:	
Regular Attendance	
Does at least one parent or legal guardian a over a period of	ttend an act of public worship at Church once a month
5+ years	Π
4 years	
3 years	
2 years	
•	a month, as an indication of their commitment to the
faith community.	
(Relates to Admissions Procedures Note 3	as a tie breaker)
I the faith leader named above have read t parent has met the requirement for regular	he admissions criteria and wish to endorse that this • and sustained worship.
Signed	Date
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