Wigan Saint Andrew's Church of England Primary school

Supplementary Information Form

This form should be returned, as detailed in the Booklet for Parents "Admission to Primary Schools 2024-2025" when completed by the closing date.

Surname Christian name	
Date of Birth / /	nild to confirm this)
Fathers name	
Address	
Post Code	
Telephone	
Mothers name	
Address (if different)	
Post Code	
Telephone	
Does the Child have Brothers or Sisters in school? YES	NO
Does your child have a statement of special educational needs?	YES * NO
Is your child in public care (looked after child)?	YES * NO
* A letter from a suitable authority must be attached	

Have you or your child attended a YES	C of E Church for at least once per month in the last 12 months? NO
Which one?	
	Have you attended any other Church?
	YES
	Which one?
I and/or my child have attended s	ince / /
Please ask the Priest/Minister of the month in the last 12 months;	ne Church to verify that you have attended for at least once per
•	y ability) the child and/or person signing this form lace of worship in the last 12 months
Signed	Capacity
Name & Address	
	Telephone
Place of Worship	
Denomination	
public worship and has not provide	d specified for attendance at worship the church has been closed for ded alternative premises for that worship, the requirements of these on to attendance will only apply to the period when the church or railable for public worship.
Signature	(Parent/Guardian)
Date of application /	/