## **Bickershaw Church of England Primary School**

## **Supplementary Information Form**

Ch	ild's Details:	
Full Name:		
Date of Birth:		
Home Address:		
Postcode:		
Telephone No:		
		abscription criteria once places have been allocated to pupils with a Statement of Special ion, Health and Care Plan:
1.	Is the child in public care	or a previously looked after child? (evidence required)
1 0 1		gularly involved in the work and worship of Bickershaw Parish Church and attend on a
	regular basis <sup>(a)</sup>	
3.	Does the child have a bro	other or sister attending Bickershaw C. E. Primary School on entry
	Surname:	Forename:
	Surname:	Forename:
4.	Are children's parents regularly involved in the work and worship of another Anglican Church and attend on a	
	regular basis <sup>(a)</sup>	(Which)
5.	Are children's parents re-	gularly involved in the work and worship of another Christian Church and attend on a
	regular basis <sup>(a)</sup>	(Which)
(a)	Regular attendance is deemed to be a minimum of once a month for 12 months – written evidence required from Vicar/Minister. In the event that during the period specified for attendance at worship the church has been closed for public worship and has not provided alternative premises for that worship, the requirements of these admissions arrangements in relation to attendance will only apply to the period when the church or alternative premises have been available for public worship.	
Pare	ent's Name:	Parent's Signature: Date:
Application to Governors for Admission to Bickershaw Church of England Primary School commencing September		

PLEASE NOTE THAT COMPLETION OF THIS FORM DOES NOT GUARANTEE A PLACE AT THIS SCHOOL.