N.B. The information provided on this form will be used to apply criteria 3, 4, 5 & 7 of the published Admission's Policy.

CHRIST CHURCH CE PRIMARY SCHOOL WEST BRIDGEWATER STREET LEIGH, LANCS WN7 4HB

PHONE: 01942 673667 FAX: 01942 680757



Supplementary Application Form

1	Child's Surname:			
2.	Child's Christian/Forename:			
3	Child's date of birth:			
4.	Home Address:			
	Telephone Contact number:			
5	Is your child in receipt of a Statement of Educational Need/EHC Plan			
6	Siblings who will still be at the education:	lings who will still be at the school at the time the younger child would commence cation:		
	Name: Date of Birth:	Year Group:		
	Name: Date of Birth:	Year Group:		
	Name: Date of Birth:	Year Group:		
7	Full names and address of pare child:	Ill names and address of parents(s) who has/have parental responsibility for the ild:		
8	Do you attend church at least once a month and have you done so for at least one year? YES/NO			
9	Place of Worship:		Church Contact Name and address -	
			Contact Number -	

PLEASE NOTE:

- As we are a voluntary-aided (church) school, the governing body decide who will be offered a place if there are more applications than places based on our published criteria. The information given will help the governors arrive at that decision.
- 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