ASTLEY ST STEPHEN'S CE PRIMARY SCHOOL

Supplementary information form

Child's Surname	Forename(s)	Date
of Birth		
Address		Postcode
	Telephone No.	
Father's/Guardian's full name		
Address if different from above	e	
Mother's/Guardian's full name		
Address if different from above	e	
Yes/No	hild or have they ever been previously looked after – in	ncluding adoption?
	or sister(s) who are currently on roll at the school	
	3	
	4	
Does one of the child's parent(s) / guardian attend public worship at St. Stephen's chu	arch*? Yes/No.
churches (St. Stephen's Astley	e from 26 July 2020 they will be held on a three-week in St. George's Tyldesley, St. John's Mosley Common) whip at any of these three churches can count towards so	and so from 26th July
Has attendance been for 20 or r Yes/No	more times over the previous 2 years immediately prior	r to application**?
Signature of St. Stephen's min	ister	
Does one of the child's parent(parish or in another parish? Ye	s) / guardian attend public worship at another Christians/No.	n Church in St. Stephen's
	more times over the previous 2 years prior to application	
Signature of minister		

**In the event that during the period specified for attendance at worship the church or relevant place of worship 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 relevant place of worship or alternative premises have been available for public worship. Consequently, the requirement to demonstrate a commitment to the Christian faith by attending a minimum of 20 times or more over the previous two years immediately prior to application to be eligible under this criteria will be adjusted pro rata, with the minimum attendance requirement reduced by 1 for every month, or part month, that the relevant church has been closed for public worship in the two years immediately prior to the date of application for admission to Reception in September 2025.

Are there any particular medical or social reasons for your application for a place for your child at this school? $Yes/No___$
If yes, please see criterion 6 in the school's admissions policy and ensure that separate written professional evidence is provided to the school by the closing date for applications.
Notes:
1 The Governors reserve the right to verify any information given on this form.
2 The giving of false information may make this application invalid.
3 Medical and other information given will be treated in the strictest confidence.
4 The return of this form does not in any way guarantee a child's place in the school.
5 Forms should be returned as detailed in the booklet for parents 'Admissions to Primary Schools'
6 Places will be allocated in accordance with the Governors' admissions criteria as set out in the school admissions policy
I certify that the information given on this form is correct
Signed (Parent/Guardian) Date

Please note that this document is for school purposes only and is used to provide supplementary information to support your application.

The official application form from your Wigan School Organisation Team must be completed if your child is to be considered for a place in a Wigan School.