



Kirkstall St Stephen's

Church of England (VA) Primary School
Headteacher : Mr S Viles

<http://www.kirkstall-st-stephens.leeds.sch.uk/>
contactus@kirkstallss.net

**Morris Lane
Kirkstall, Leeds
LS5 3JD**

Tel: 0113 382 1960

Supplementary Information Form

Admissions 2021/22

1. Details of the Child:

FULL NAME (Including Surname)	
Gender: (Delete as necessary) MALE or FEMALE	Date of Birth:
Address (where the child permanently resides)	
Religion of the Child:	

2. Names of Parents/ Guardians:

Full Name:	Contact Telephone Number	Email address	Relationship to Child

3. If you have other children attending this school at the time of this applicant's admission please state their name(s):

Name:	Year Group:
Name:	Year Group:
Name:	Year Group:
Name:	Year Group:

4. Faith based Application: Please complete section 4 if you wish to have your application considered under the 'Faith Based' criteria.

3.1 Children whose parents/ family have worshipped regularly at the church of Kirkstall St Stephen's or St Mary's Church, Hawksworth Wood for two years immediately preceding the application. (see note 2 and 4 of admission policy)

3.2 Children whose parents/family have worshipped regularly at another Christian Church for two years preceding the date of application.(see note 2, 4 and 5 of admission policy)

"Christian Church includes only those churches which are members of Abbey Churches Together or another Churches Together group on the West Yorkshire Ecumenical Council's list of active CT groups in the region"

Please indicate which church or place of worship you usually attend:

Name of Church or place of Worship:	
Address of church or place of worship:	
Telephone Number:	
Your Religious Denomination:	
Name and Address of your Vicar/minister:	
Telephone Number:	
Email Address:	

Signed by parent/guardian:		Date:
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CONFIDENTIAL

4 For Clergy/ Church Leader’s use only:

The parents of the child names on page 1 of this application have nominated you as a referee to confirm the information given on the supplementary information form. Would you please complete the following section.

How are the family known to you:	
Would you consider the child and/or their family to be at the heart of your Church?	
Does the Child and/or their family attend church at least once a month? (Delete where possible)	YES / NO
Has the child and/or their family been in regular attendance in your congregation for at least the last two years? Please state approximate timescale:	YES / NO years
Would you consider the child as suitable for education in a Church of England School?	YES / NO

Thank you for taking the time to complete this reference.

Please make any additional comments that you feel we should consider when reviewing this application.

Please also stamp this form with the church’s official stamp or attach an official letterhead.

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Please return the full application form in the envelope provided by 31st January 2017.

Thank you for your assistance

Name:

Date:

Signed: