

SUPPLEMENTARY INFORMATION FORM

Please note this is a supplementary form for administration purposes only and is not an application form. Only complete this form if you are applying for a place in line with the Foundation / Faith oversubscription criteria for the academy.



Application for a place on faith grounds at:

Name of Academy	The King's CofE Academy
------------------------	-------------------------

Section 1

Full Name of Child	Date of Birth (dd/mm/yy)

Address

Postcode:

Section 2

Name and Address of Church / Place of Worship attended

How long have you worshipped here?

	Years & Months
-------------	----------------

How many times per month (including weekday services) do you worship?

	x Per Month
-------------	-------------

Name of the Principal Minister/Faith Leader of your current place of worship and contact details

If you have moved within the last year, please give details of your previous place of worship and length/frequency of attendance.

Section 3 Declaration by Parent/Guardian

I certify that the details provided are, to the best of my knowledge, correct.

Signed:	
(Parent/Guardian)	Date:
Name	
(Please print in BLOCK CAPITALS)	

Section 4 Declaration by Principal Minister / Faith Leader

Is your church community in membership with, or affiliated with, either of the following groups?

Churches Together in Britain and Ireland (CTBI)	Yes ☐	No ☐
Churches Together in England	Yes ☐	No ☐
Evangelical Alliance	Yes ☐	No ☐

I certify that the information provided in Sections 2 is, to the best of my knowledge, correct.

Signed:		Official Stamp (if available):
(Principal Minister/Faith Leader)		Date:

PLEASE RETURN TO:

The Admissions Officer
The King's CofE Academy
First Avenue
Kidsgrove
Stoke on Trent
ST7 1DP