

SUPPLEMENTARY INFORMATION FORM

In line with our published admission policy, all parents/carers wishing their child to attend Manston St James Primary Academy must complete this form and return to the academy office as soon as possible. Please answer the questions to the best of your knowledge, then sign and date at the bottom of the form. Thank You.

CHILD'S INFORMATION

Surname: _____ Forename(s): _____

Date of Birth: _____ Male / Female * (Please delete)

Address: _____

_____ Post Code: _____

PARENT / CARER INFORMATION

Title: Mr / Mrs / Miss / Ms / Other * (Please delete) _____

Address (if different from above): _____

Telephone: _____ Mobile: _____

E-Mail Address: _____

SIBLING DETAILS

Does the child have an older sibling(s) currently attending the academy? Yes / No * (Please delete)

If yes, please give the full name and Year Group of the sibling(s)? _____

FAITH DETAILS

Do you **regularly**** worship at St James the Great Church Manston? Yes / No * (Please delete)

Do you **regularly**** worship at another Christian Church or another Faith? Yes / No * (Please delete)

***** Regular worship is considered to be attendance at minimum monthly intervals over a year and will be subject to a reference from a member of the clergy/faith leader.***

FAITH CONTACT DETAILS

Please provide the details below for the vicar, minister or faith leader who can provide a reference in support of the information provided above.

Name: _____

Address: _____

Telephone: _____

E-Mail: _____

PARENT/CARER SIGNATURE: _____ **DATE:** _____