

St Mary's Church of England Primary School

Quex Road London NW6 4PG Telephone: 020 7372 6565

Email: admin@stmarykilburn.camden.sch.uk



Please read all sections of this form and the Admissions Policy very carefully before you complete this form. Please complete all relevant sections in full.

SUPPLEMENTARY INFORMATION FORM FOR ADMISSION TO ST MARY'S SCHOOL RECEPTION TO YEAR 6 2019-20

OFFICE USE ONLY

DATE FORM RECEIVED: _____ DISTANCE FROM SCHOOL: _____

Family Details

| | | |
|--|---------------------------------------|-------------|
| Child's first name | Family name | |
| | | |
| Date of birth | Boy / Girl | |
| | | |
| Address (including full post code and London borough) | | |
| | | |
| Post Code: _____ | | |
| Does this child currently have a brother or sister attending St Mary's school? YES / NO | | |
| | | |
| Name(s) | Class | |
| | | |
| Parent / carer's* full name | *Carer's relationship to child | |
| | | |
| Home contact number / mobile | Contact number | |
| | | |
| Parent / carer's signature | | Date |
| I confirm that the above information is correct. | | |
| Signed | | |

PRIEST / MINISTER'S SECTION

Complete this part of the form if you are applying under criteria 1 to 5

Place of Worship

| Name, address and denomination of Christian Church (see Note 1) | Religion |
|---|----------|
| | |

Priest / Minister's Section **TO BE COMPLETED BY A PRIEST OR MINISTER ONLY**

Please note that this section of the form must be completed by a priest / minister who is able to do so from personal knowledge of the applicant and family concerned.

| | |
|---|-------------|
| Priest / Minister's name and address | |
| | |
| Telephone number | |
| 1. Please tell us how long you have known the applicant and his / her family. | |
| | |
| 2. Have these parents/guardians worshipped at this church <u>at least twice a month throughout the year preceding the date of application?</u> | |
| | |
| Signed | Date |
| | |