



SUPPORTING INFORMATION FORM

Closing date for receipt of this form to The King's CE School by 31st October 2018



If you need help to complete this form, please contact us at the address above.

STUDENT DETAILS						
Surname of child: Please use block capitals			Forename:			
Middle name(s):			Date of Birth:			
Gender: please tick	ender: <i>please tick</i> Male \Box Female \Box					
Full name of Parent/Carer:						
Address: (where the child normally resides)						
Postcode:						
Daytime contact no:			Email address:			
Name of present school:						
Name of brothers/si	sters attending	The King's CE S	school:	Year group:		
Does your child have an Educational Health Care Plan from local authority? (EHCP) Yes No						
Is your child a looked after child (LAC) in foster care?				Yes No		

Before completing the remainder of this form, please read the Admissions Criteria carefully.

PLEASE TICK THE APPROPRIATE CATEGORY. YOU CAN APPLY UNDER MORE THAN ONE CATEGORY.

Church of England familie YES? TICK BOX – N	oundation Places are for practising
Category B – 3 members of or	Ing for a GOVERNOR'S PLACE? 20 Places (Governor Places are for practising ther recognised Christian denominations) CK BOX – Now check if you wish to apply under r category, then answer all questions 1-4
Cate	you applying for a FAITH COMMUNITY PLACE? gory C – 20 Places (Faith Community Places are for tising members of other world religions) YES? TICK BOX – Now check if you wish to apply under another category, then answer all questions 1-4
	Are you applying for an OPEN PLACE? Category D – 60 Places (Open Places are for families of any faith or none seeking an education based on Christian ethos) YES? TICK BOX – If this is the ONLY category you have selected now answer questions 3 & 4. If you are also applying under any of the above categories, please answer all questions 1-4

QUESTION 1

ONLY REQUIRED FOR APPLICATIONS WHO HAVE SELECTED CATEGORIES A, B AND C ABOVE					
Name of place of worship:					
CHILD					
Please indicate frequency of worship: Daily Weekly Monthly Occasionally					
FAMILY					
Please indicate frequency of worship: Daily Weekly Monthly Occasionally					

QUESTION 2

ONLY REQUIRED FOR APPLICATIONS WHO HAVE SELECTED CATEGORIES A, B AND C ABOVE				
TO BE COMPLETED BY VICAR/FAITH LEADER				
Name/position:				
Place of worship:				
Is there evidence of family commitment to the church/faith community?				
Very Strong Strong Reasonable Little/no				
Please add any comments that you wish to make on the next page Vicar/Faith Leader Comments:				
Official stamp/signature:				
Please continue on separate sheet if necessary				
QUESTION 3				
WHY IS A CHURCH OF ENGLAND SCHOOL IMPORTANT TO YOU?				

QUESTION 4

PLEASE PROVIDE EVIDENCE OF ANY EDUCATIONAL, SOCIAL OR MEDICAL NEEDS THAT YOU WISH US TO BE AWARE OF. (Attach relevant information)
To the best of my knowledge and belief, the information I have provided on this form is correct.
Signed parent/carer Date
PLEASE COMPLETE THE CHECKLIST BELOW
If applying for a place under category A, B, or C has your faith leader completed question 2?
Have you named The King's School on the Common Application Form (CAF) and returned the CAF to the local authority?
Have you signed and dated the form?
Are you sending this form before the deadline – 31st October 2018?
When completed, please return the form with any additional information (and a stamped addressed envelope if an acknowledgement is required) to:
The Admissions Officer
The King's School
Regis Rd, Tettenhall Wolverhampton, WV6 8XG
Please add any further comments below.