

**LOWER PEOVER C.E. PRIMARY SCHOOL
SUPPLEMENTARY FORM FOR ADMISSIONS**

Name of child:

Surname	Christian names	
Date of birth	Boy	Girl

Name of parent/guardian

Address

Post code

Telephone

Mobile

Place of worship one of parents / guardians regularly attends:

Name of place of worship

Address

Name of vicar / priest / minister / faith leader / church officer

Address

Post code

Telephone

Worship attendance:

Please tick if you have attended a minimum of two services per month for at least six months prior to the closing date for applications as in criteria

A letter from your incumbent or minister or other church officer is required as proof of this attendance.

Please tick if the letter is attached

Special medical or social Circumstances

Tick here if you are applying under this criterion

Give details of professional evidence submitted