



*Believe Succeed & Grow*

**ST OSYTH C of E PRIMARY SCHOOL  
FOUNDATION SCHOOL WITH CHURCH OF ENGLAND  
CHARACTER**

**APPLICATION FOR ADMISSION  
SUPPLEMENTARY INFORMATION FORM (SIF)**

*(Parents of Looked After Children [CLA] and Children with a Statement of  
Special Educational Needs [SEN] are not required to complete this form)*

<b>Please complete as much of this form as applies to your situation. <i>Thank you.</i></b>		
<b>Year of Admission:</b>		
<b>Child's Surname:</b>		
<b>Forenames of Child:</b>		
<b>Gender:    M / F</b>	<b>Date of Birth:</b>	
<b>Parent/ Guardian 1 Surname:</b>		<b>First Name:</b>
<b>Address:</b>		
<b>Post Code:</b>	<b>e-mail Address:</b>	
<b>Home Telephone Number:</b>		<b>Other Contact Number:</b>
<b>Parent/ Guardian 2 Surname:</b>		<b>First Name:</b>
<b>Address of Parent/ Guardian 2 if different from above:</b>		
<b>Post Code:</b>	<b>e-mail Address:</b>	
<b>Home Telephone Number:</b>		<b>Other Contact Number:</b>
<b>If parents/carers have separate addresses please indicate which address is your child's main residence.</b>		
<b>Parent/ Guardian 1 Address        /        Parent/ Guardian 2 Address</b>		
<b>Names of Siblings</b>	<b>Date of Birth</b>	<b>Current Year group at St Osyth CE Primary School</b>
<b>Name of Church the family attends:</b>		
<b>Name &amp; Address of Vicar/Minister/Priest of the above Church:</b>		

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# ST OSYTH C of E PRIMARY SCHOOL FOUNDATION SCHOOL WITH CHURCH OF ENGLAND CHARACTER

Is either parent/guardian on the Electoral Roll of St Peter & St Paul, St Osyth? <span style="float: right;">Yes / No</span>	
Date of current enrolment on Electoral Roll (or if of another denomination, your Membership):	
Parent/ Guardian 1:	Parent/ Guardian 2:
How often do you usually attend your church?	<input type="checkbox"/> Less than once a month <input type="checkbox"/> At least once a month <input type="checkbox"/> Other (please detail)
Please indicate, if you wish, your commitment to the life and activities of your Church and for how long?	<input type="checkbox"/> Less than 9 months <input type="checkbox"/> 9 months or more
<p>Please indicate if you have been on the Electoral Roll of another Church of England church or the Electoral Roll or Membership Roll of another Church denomination within the last 9 months and transferred to the St Osyth Roll or to the Electoral Roll or Membership Roll of another Church in the locality. You may attach supporting documents indicating attendance, and commitment to the life and activities of this other Church authorised and approved by signature of the Vicar/Minister/Priest of the other church.</p> <p>Signature of Vicar/Minister/Priest ..... Date .....</p>	
Any Social, Medical, Pastoral or Other Reasons for your child to attend St Osyth CE Primary School:	
Signatures of Parents / Guardians:	Date:
<p><i>Thank you for your application. Please return this form to the school before the statutory closing date.</i></p> <p><b>Please note:</b> you still need to complete the LA's official CAF form. If you have not completed one the school can tell you where to obtain a copy. If you do not complete the CAF form, you cannot be considered for a place at this school. <u>Please return this SIF Form direct to the School.</u></p>	
<p>For use by the school:</p> <p>If a visit has been made by Parent or Carer to the School:</p> <p>Name of Parent/Guardian ..... who visited on (date) .....</p> <p>was seen and shown around by (staff member/s) .....</p>	