St Jérôme Church of England Bilingual School
Supplementary Application Form in Year Admission

Reception		Year 1		Year 2		Year 3	
Year 4		Year 5		Year 6			

Please tick the year group which applies

This form should be completed by any applicants who want to apply for a Foundation place at St Jérôme Church of England Bilingual School. Section A should be completed by the Parent/Guardian and Section B by a member of the Clergy.

Section A (to be completed by the parent/ guardian)

's First Name(s) | **Child's Surname**

Child's Home Address

Full Postcode

Parent/ Carer **Title** | **First name or initial**

Surname | **Relationship to Child**

Daytime phone | **Mobile phone** | **Email**

Section B (to be completed by a member of the clergy)

Note to clergy: The Governors, in association with the London Diocesan Board for Schools, would be most grateful if you could provide the following information so that we can allocate the Foundation places in line with the School's Admissions Policy.

Name of Clergy | **Phone number**

Name of Church | **Email address**

Church Address

Is your Church either a full or associate member of Churches Together in England or the Evangelical Alliance? **Please circle** **YES / NO**	Has the child attended a church service with a parent, carer or guardian for at least two years on at least two occasions per month? **Please circle** **YES / NO**

SIGNED: ..... DATE: .....
(Signature of Clergy)