

## Holy Trinity C.E. Primary School Eagans Close, East Finchley, N2 8GA

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## Supplementary Application Form for Admission to Reception – 2020

Before completing this form, please make sure you have read the School's Admission Policy and have filled in a Common Application Form (CAF) online through the Barnet eAdmissions portal.

This form only needs to be completed if you are applying to the school on religious grounds under criteria 2, 4 or 5 of the School's Admission Policy

## Personal details

Name of Child in Full				
Date of Birth	/	Gender	☐ Male ☐ Female	
Present Address				
			Postcode	
Telephone Numbers	Home	Mobile		
	Email Address			
Name of Parent(s)/Guardian(s) Name				
Name of Falent(s)/Gua	ilulali(s) Ivallie		<del></del>	
Name of Current School	ol	Address:		
	Postcode	Phone No:		
Name of Sibling currently attending the school (if applicable)				
Information about Religion				
Name and address of church				
Denomination/s a Chu	and Of Francisco d			
Denomination(e.g. Church Of England)				
Name and address of Minister who can confirm your attendance				

Please ask your minister to complete the section over the page before returning the form to Holy Trinity School.

## **Clergy Reference**

The parents/guardians of the child named on the front of this form are applying for a place at <b>Holy Trinity School</b> , <b>East Finchley</b> and would like to use you as a referee. Would you kindly complete this section and return this form to the parent/guardian. Thank you for your help.			
Have the parents/guardians worshipped at your church/place of worship for 18 months or more? ☐ Yes ☐ No			
Do they attend church/religious worship at least once a month? ☐ Yes ☐ No			
Is your church Anglican? ☐ Yes ☐ No			
Signature of Minister/Incumbent:	Date://		
Print Name			
Church Stamp or Seal:			
Declaration by Parent/Guardian			
I confirm that all the information given on this form is correct			
I wish to apply for a place for my child at Holy Trinity, East Finchley			
Signature of Parent / Guardian	Date / /		