

Unique and Valued by God
St. Mark's Church of England Primary School



Harleyford Road
Kennington, London SE11 5SL
Headteacher: Mr Sola Ingram
Tel: 02077351467

Email: admin@st-markscofe.lambeth.sch.uk

**Supplementary Form for ADMISSION to
St Mark's Church of England Primary School
Harleyford Road, Kennington, London SE11 5SL**

Completion Instructions:

- Parents should **only** fill in this form if they are applying for a Church place at the above school
- **DON'T FORGET** to get your Priest, Minister, Vicar, Pastor to complete and sign the form on the back.

1. Pupil Information:

Surname of child:

Other names:

Date of Birth:

Male/Female

2. Parent / Guardian / Carer Information:

Name of Parent(s) / Guardian(s) / Carer(s)

Home Address:

Post Code:

Home telephone:

Daytime telephone (If different):

3. Church Commitment

Name of Church which you attend:

If this is not an Anglican Church, please state the denomination to which your church belongs:

How frequently do you attend services? (Please circle)

Weekly Fortnightly Monthly Occasionally

How long have you worshipped in this Church? _____ years _____ months

If 12 months or less, please supply the name of your previous Church & Minister

Please supply other evidence of your commitment to your church community.

4. Church Information:

Name of Minister / Priest:

Address of Minister / Priest:

N.B. If you have recently moved, please give the name and address of your previous Minister / Priest

If you wish, you may state your reasons for applying for this school here:

I confirm that the information given above is correct and that I have read the admission policy.

Signed _____ Date _____
Parent / Guardian / Carer

PLEASE ASK YOUR CHURCH MINISTER TO COMPLETE THE SECTION BELOW TO VERIFY THE INFORMATION GIVEN ABOVE AND THEN PLEASE RETURN IT TO THE SCHOOL.

5. Minister's / Priest's Reference:

Do you agree with the information in section 3 in relation to church commitment? **YES/ NO**

If **NO**, please state where your views differ from that of the parent / guardian / carer.
(N.B. parents may be more committed than they say, or may be less committed. You may use a continuation sheet if necessary.)

Is your church a member of a local Churches Together Group, Churches Together in Britain and Ireland, the Evangelical Alliance or the African and Caribbean Evangelical Alliance? **YES / NO**

If **Yes** please specify _____
Please supply your registration Number (where appropriate) _____

N.B. if the family is refused a place at the school and appeals against the Governors' decision, this form may be used as evidence at the appeal.

Signed (Minister/Priest) _____ Date _____

Please add your Church's stamp here