

Cronton C. E. Primary School Application for Admission - Supplementary Form - September 2024

This form is for completion, in addition to the Local Authority preference form, by applicants who wish to provide information for consideration under criterion 4 5 6 or 7 of the school's oversubscription policy. It should be returned directly to Cronton C.E. Primary School by the closing date of 15^{th} January 2024. NB This form will be disregarded if the applicant does not also name Cronton C.E. Primary School as a preference on the Local Authority preference form.

<u>PART A</u>	
Child's	
Surname	
al : Lu	
Child's	
rorename(s)	
Home	
Address	
Post Code	Tel:
Date of Rirth	
bare of birth	
Name of parent who is provid	ing the information about religious practice:-
·	
	relating to the criterion/criteria for which you wish to provide information:
<u>Criterion 4</u>	ton Miggian Chunch?
Do you attend worship at Cron [.] Yes □ No □	Ton Mission Church?
	r/minister to complete part B of this form
, ,,	
<u>Criterion 5</u>	
	kes Farnworth or St. Ambrose Widnes (East Widnes Team)
Yes □ No □	
It yes, please request the relev	vant faith leader to complete part B of this form
Criterion 6	
Do you attend worship at any o	ther Anglican Churches?
Yes□ No □	•
If yes, please request the relev	vant faith leader to complete part B of this form
Cuthout on 7	
<u>Criterion 7</u> Do you attend worship with any	other Christian Denomination?
yes □ No □	omer christian benominations
	vant faith leader to complete part B of this form
, ,	·
	period specified for attendance at worship the church [or, in relation to those of
•	f worship] has been closed for public worship and has not provided alternative
•	e requirements of these [admissions] arrangements in relation to attendance will
only apply to the period when alternative premises have bee	the church [or in relation to those of other faiths, relevant place of worship] or
urrernumve premises have bee	n available for public worship
Criterion 8	
Does your child attend Cronton	CE Nursery?
Yes□ No □	
If yes, please specify the date	your child started
T have read the current Admiss	sions Policy of the school and confirm the information I have provided to be correct.
	sions Folicy of the school and confirm the information I have provided to be correct.
Org. 141 6111	
NOTE: Because the number of	applications for places at the school may exceed the number of places available, the

Governors regret that completion of this form does not guarantee that a place will be offered to your child.

Cronton C. E. Primary School

<u>PART</u> B

Form for admission to Cronton C. E. Primary School, September 2024

To be completed by the priest/vicar/minister of the supporting church in relation to the parent of the child named overleaf: Name of Priest/vicar/minister Address Please delete as appropriate: NB Please complete the form with reference to Parent named overleaf. The Parent currently attends this church $Yes \square$ No The Parent attends at least monthly Yes □ No П The Parent has attended at least monthly for 12 months prior to 15th January 2024. No Yes I have checked the information herein and can verify that this family have worshipped at this church for a minimum of monthly since January 2023. Signature of priest/vicar/minister _____ (By signing this form you are verifying that you have checked that the above information is correct at the date of signature.) Date:__

The Governors of Cronton Church of England Primary School thank you for taking the time to complete this form.

Please return this completed form to the Parent who is requested to return it to school by 15th January 2024.