



Archbishop Temple Church of England High School

APPLICATION FOR ADMISSION TO SECONDARY SCHOOL 2024

PLEASE COMPLETE THIS FORM USING CAPITAL LETTERS. THANK YOU.

1. Pupil Details		
Legal Forename		
Middle Name(s)		
Legal Surname		
Given Name(s)		
Preferred Forename		
Preferred Surname		
Address (where he/she normally resides please note "normally" is more than four nights per week)		
	Pos	stcode
Date of Birth (dd/mm/yyyy)	/ /	

2. Supporting evidence for Application				
Are you applying for a place because of: (you may tick more than one box)		\checkmark	If place is faith based please indicate faith group	\checkmark
special social / medical needs				
*Supplementary documentation must be supplied to			Christian	
support this category				
child of school staff			Muslim	
child's parent / carer's faith commitment			Hindu	
attendance at a C of E Primary School			Sikh	
			Other world faith (please specify)	
priest / minister / faith leader Name of vicar / minister / priest / faith leader			the following section WITH your / vicar /	
Name of Place of Worship				
Address				
Postcode				
Telephone number				
Email address				

3a. How have you as a parent attended this Church / place of worship (please tick appropriate box).

Weekly/ Fortnightly for **2 years** leading up to 1st September 2023

Weekly/ Fortnightly for **1 year** leading up to 1st September 2023 **Monthly** for **1 year** leading up to 1st September 2023

"In the event that during the period specified for attendance at worship the church [or, in relation to those of other faiths, relevant place of worship] has been closed for public worship and has not provided alternative premises for that worship, the requirements of these [admissions] arrangements in relation to attendance will only apply to the period when the church [or in relation to those of other faiths, relevant place of worship] or alternative premises have been available for public worship".

Please note that attendance claims must be verified by the appropriate incumbent or church authority

Signed	(Parent) Contact Tel No
Countersigned	(Vicar/Priest etc) Date
Office held	Contact Tel No

The information on this form will be a key factor in determining admissions to the school. It is the responsibility of the parent to complete the form in the presence of their Vicar, Priest, Minister etc. IT SHOULD THEN BE RETURNED TO THE SCHOOL BY 31_{st} OCTOBER 2023.

4. Primary School (Please enter name and address of the primary school your child attends)				
Name				
Address				
Postcode				

Please note that the information on this form is processed electronically for administrative purposes and is subject to the terms of the Data Protection Act 1984.