



**The Bishop Rawstone Church of England Academy
Croston**



Bishop Rawstone is supported by local parishes and is a Church of England
Christian school. All parents/guardians are expected to support the Christian ethos,
aims and disciplinary procedure.

REQUEST FOR ADMISSION FOR AUGUST 2024 – JULY 2025

Looking for a place in Year: Year 7 Year 8 Year 9 Year 10 Year 11

(Please tick appropriate box)

NAME OF CHILD (Please use CAPITAL LETTERS)

SURNAME _____

FORENAME _____

DATE OF BIRTH _____

GENDER _____

NAME OF PARENT/GUARDIAN _____

HOME ADDRESS _____

POST CODE _____

EMAIL ADDRESS _____

TELEPHONE NUMBER(s) _____

I AM APPLYING FOR A PLACE BECAUSE OF: - (YOU MAY TICK MORE THAN ONE BOX)

Living in the local area Sibling in school Parental Faith Commitment Special Social/Medical Needs

IF YOU ARE APPLYING ON CHRISTIAN FAITH GROUNDS PLEASE COMPLETE THE FOLLOWING SECTION. Please note, to qualify for Christian Faith Commitment your worship must be in a church who has membership of the Churches Together in England. (Please do not complete Section 5 and 6 unless you are applying for a place under the faith-based criteria)

Place of worship which one parent/guardian regularly attends _____

Address _____

Name of Vicar/Priest/Minister/Faith Leader _____

Address (If different from above) _____

Please provide a letter from your faith leader or a member of the clergy which confirms your commitment explaining how long and how frequent you have been a worshipper at this place.

Worship attendance: - How frequently do you attend worship? (Please tick one box)

At least Fortnightly or Less than fortnightly

For how long has this been your practice? (Please tick one box)

At least Fortnightly or Less than fortnightly

School child attending at present: -

Name _____

Address _____

Telephone Contact Number _____

Has your child any brother, sisters, step, half, foster or adopted siblings attending Bishop Rawstorne at the time of application?

Yes No

If yes, please provide the following: -

Name of student _____ Current Year Group _____

If your child comes to Bishop Rawstorne will you support our Aims, Disciplinary Procedures and Christian ethos?

Yes No

Does your child have any Special Educational Needs?

Yes No

If yes, please provide details _____

If there are any other considerations you would like to bring to the notice of the Governors please complete a separate sheet and attach it to this form. Have you attached a separate sheet?

Yes No

I am pleased to support my son/daughter's application to join Bishop Rawstorne Church of England Academy, Croston

Signature of Parent/Guardian _____ Date _____

Please return the completed form(s) to: -

Governors Admission Committee
Bishop Rawstorne Church of England Academy
Highfield Road
Croston
Leyland
PR26 9HH