PLEASE NOTE

In-year applications: Applicants should provide proof of address such as:				
Council Tax bill Tenancy Agreement from a registered private letting agency Utility Bill				
Twyford receives in excess of 600 applications each year and there is a waiting list for ALL YEAR GROUPS	•			
The completed form should be sent by the parent/carer to the Governors' Admission Panel, Twyford Church of England High School, Twyford Crescent, Acton, London W3 9PP				
FOR OFFICE USE				
Date received:				
In-year for 2024/25				
□ □ 4 of 4				



TWYFORD CHURCH OF ENGLAND HIGH SCHOOL Twyford Crescent, Acton, London W3 9PP Telephone Number: 0208 752 0141

Application group	Points Total
W	

IN-YEAR SUPPLEMENTARY INFORMATION FORM (RELIGIOUS REFERENCE) FOR A WORLD FAITH PLACE

to be used by members of World Faiths applying for a place in Years 7 - 11

APPLICATION FORMS MUST BE RETURNED TO THE SCHOOL AT THE ABOVE ADDRESS

This form is for the use of the Governors' Admission Panel so that they may consider this application fully. The information given, together with any supporting evidence submitted, is the Governors' only source of information. Applicants on behalf of a Looked After or Previously Looked After Child need only complete page 1 of this form. All other applicants **need to complete BOTH sections of the form accurately and with the full details.** The form, together with all supporting evidence, is made available to the Appeals Panel in the case of any Appeal against non-admission. In all other aspects, information is treated in confidence.

If you have difficulty in completing any part of the form, please email admissions@twyford.ealing.sch.uk

FORENAMES:				
DATE OF BIRTH:				
HOME ADDRESS:				
	Post code:			
Current school:				
Full Name of any sibling (brother/sister already at Twyford who will still be at Twyford next academic year)				
Parent or carer details: (THIS IS WHO LETTERS FROM TWYFORD WILL BE ADDRESSED TO)				
Surname:	Email address:			
Forename:				
Mr/Mrs/Miss/Ms:	Alternative contact:			
Relationship to child:	Name:			
Home Telephone:	Telephone number:			
Mobile Telephone:				
this form is correct. Signature of Parent or Carer	gh School and confirm that the information submitted on a acknowledgement that the school has received it cation to the school please ensure you receive a			

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PART A

Religious Reference.

This part is to be completed by **the Religious Leader**, in the presence of the applicant. We suggest that the details are discussed and agreed with the parents before submission to the Governors. Religious leaders may wish to retain a copy for their own records should further enquiries prove necessary. Your attention is drawn to the admission criteria which have already been given to the applicant, and which are available on the school website (www.twyford.ealing.sch.uk).

Please note this form cannot be completed by teachers of Saturday Schools.

[Please tick the	correct box]
. Child's Gurdwara/Temple/Mosque/Synagogue	e Weekly
attendance over the last 5 years. Please tick the appropriate box that describes the child's attendance. (max 5 points)	3 times a Month
	Fortnightly
	Monthly
	Occasionally
 Parent's Gurdwara/Temple/Mosque/Synagoguattendance over the last 5 years. Please tick the appropriate box that describes the parents' attendance. (max 5 points) 	Weekly 3 times a Month Fortnightly Monthly Occasionally
	es? Three years
	Four years
` ' '	Five years
child attended the Gurdwara/Temple/Mosque/Synagogue service (max 5 points)	Two years
. For how many years <u>over the last 5 years</u> have	re the One year
Parents attended the	Two years
Gurdwara/Temple/Mosque/Synagogue? (max 5 points)	Three years
(max a pomis)	Four years
	Five years

Note to the Religious Leader:

Please put your full signature next to any alterations.

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.

Name of Place of Worship	
Address:	
Postcode .	
Telephone Number:	
	OFFICIAL STAMP OF PLACE OF WORSHIP
Signed:Religious leader	Name (in block capitals please)
PART E	3
TO BE SIGNED BY PARENT:	
During the last 5 years:	
If you attend more than one Gurdwara/Temple/Mos recently moved or changed Gurdwara /Temple/Mos reference from the religious leader of the other place.	sque/Synagogue, please arrange for a
I confirm that the information in Part A is correct.	
Signed: Pare	nt / Carer
Date:	

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