



CHILD'S NAME _____

ST HILDA'S CHURCH OF ENGLAND HIGH SCHOOL

APPLICATION FORM FOR ADMISSION TO YEAR 7 FOR SEPTEMBER 2015

Closing date for applications – Friday 31st October 2014

Please complete this application form having read the Admissions Policy

<p>Please ✓ the route(s) under which you will be applying.</p> <p>You can apply by more than one route.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Route A: Statement of Special Educational Needs <input type="checkbox"/> Route B: Special Consideration <input type="checkbox"/> Route C: Exceptional Medical/Social Needs <input type="checkbox"/> Route D: Christian <input type="checkbox"/> Route E: Other World Faiths <input type="checkbox"/> Route F: Examination
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PERSONAL INFORMATION *(BLOCK CAPITALS please)*

Child's surname:

First name(s):

Date of birth: Gender: Boy Girl

Address:

Post Code: Email Address

Telephone number: Mobile:

Current primary school:

School Address:

PARENT/CARER INFORMATION

Parent/Carer's surname:

First name:

Mother/Father/Carer/Other:

Address (if different from above):

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Route A: Statement of Special Educational Needs

Please tick if you are in possession of a statement of special educational needs **which names St Hilda's following consultation with the local authority.**

Route B: Special Consideration

- The child is a looked-after child in the care of a local authority

or

- The child was looked-after but ceased to be so because s/he was adopted or became subject to a residence order or special guardianship order.

Please state the name of the responsible authority

Route C: Exceptional Medical/Social Needs

Please give details of any exceptional social or medical reasons and supply documentary evidence supporting your application. Please list documents.

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Route D: Christian

1. Since January 2010 have you attended more than one church? YES/NO If so, how many?
2. Please indicate main place of worship.....
3. Name of the church you attend at present.....
4. Denomination.....
5. How often do you - the parent/grandparent - attend church and how often does your child attend church (we accept Sunday School attendance as church attendance)? Please tick the most appropriate attendance pattern in the table below. If no one option is applicable please indicate your attendance pattern on a separate sheet and attach to your application form. In the Parent/Grandparent column please state to whom are you referring?

	2012		2013		2014*	
	Child	Parent/ Grandparent	Child	Parent/ Grandparent	Child	Parent/ Grandparent
Weekly						
3 times each month						
Fortnightly						
Monthly						
Occasionally						
Never						

**Assume present pattern of attendance continues to the end of the calendar year*

6. List the details for all other churches you have attended below:

NAME OF CHURCH	DATES				NAME OF CLERGY	ADDRESS/TELEPHONE
	TO		FROM			
	M	Y	M	Y		

A copy of the Route D Vicar/Minister form (Pages 5 & 6) must be supplied for each church listed above. So if you have attended more than one church please photocopy those pages and pass to the Vicar/Minister of each church. Alternatively a letter from the Vicar/Minister is acceptable provided it supplies the exact information identified by the parents. Please give the clergy the form in good time as they may need to verify the information. If your church does not have a Vicar at present, please consult your churchwarden.

Applicants who cannot get a religious leader to confirm Church attendance should complete Page 7.

7. How do you - the parent/grandparent - participate in the whole life of your church/faith community?
Please list any voluntary church related activity.

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8. How does your child participate in the life of your faith community? Please list any voluntary church related activity.

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9. Give reasons why you would like your child to attend St. Hilda's.

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Route D: Christian – TO BE COMPLETED BY THE VICAR/MINISTER

(Please supply your Vicar/Minister with an s.a.e. to *The Admissions Secretary, St. Hilda's CE High School, Croxteth Drive, Sefton Park, Liverpool L17 3AL*)

We strongly recommend that the details are discussed with the parent(s) before final completion. Please provide information only about attendance **at your own church**, drawing either on your own personal knowledge or (if you were not at the church at the time) on information you have been able to **confirm personally** with other church officials. Please ensure that the information is as accurate as possible. Alternatively a signed letter is acceptable provided it supplies the exact information identified in this section. Please will you check the details of any information for this application. Feel free to contact school in the event of any query. All references are no longer confidential.

1. Name of child

2. Has this form been handed to you personally? YES NO.....

3. How long has this family been known to you?
(Please explain to whom you are referring as family)

4. How long have they been members of your church/faith community?
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5. Please tick the boxes for the child and parent/carer and grandparent in each year that most appropriately describes their attendances. (We accept Sunday School attendance as church attendance).

	2012		2013		2014	
	Child	Parent/ Grandparent	Child	Parent/ Grandparent	Child	Parent/ Grandparent
Weekly						
3 times each month						
Fortnightly						
Monthly						
Occasionally						
Never						

6. Have the child and parent/grandparent attended Sunday worship at least monthly for more than 3 years? **YES/NO**
If Yes, how many years in total? Child Parent/Grandparent

7. How does the parent/grandparent participate in the whole life of your church?
It is sufficient to verify the applicant's answer to Question 7 given on Page 4.
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8. How does the child participate in the life of your church?

It is sufficient to verify the applicant's answer to Question 8 given on Page 4.

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9. In your view which of the following statements best describes the parent/family commitment?
(Please tick one box only)

a) There is **very strong** evidence of parent/family commitment to the life, work and witness of the church.

b) There is **strong** evidence of parent/family commitment to the life, work and witness of the church.

c) There is **reasonable** evidence of parent/family commitment to the life, work and witness of the church.

d) There is **little** evidence of parent/family commitment to the life, work and witness of the church.

e) There is **no** evidence of parent/family commitment to the life, work and witness of the church.

Signed

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Full name (block capitals)

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Position held

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Name of Church

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Telephone number

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Date

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THANK YOU FOR YOUR ASSISTANCE IN COMPLETING THIS FORM

Closing date: Friday 31st October 2014

Route D: Christian – TO BE COMPLETED BY APPLICANTS WHO CANNOT GET A RELIGIOUS LEADER TO CONFIRM CHURCH ATTENDANCE

Please give the following information relating to your place of worship:

Name of church.....

Address

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Telephone number.....

Name of vicar/minister

The governors reserve the right to contact the above named person to verify the comments you have made on your application form.

If you cannot complete the above information please state why

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Please read and sign the following:

I declare that I cannot obtain written confirmation of my attendance at church and that the information I have given about my family's church attendance is correct. I understand and agree that the governors of the school have the right to verify the information I have given. **I am aware that the School Admissions Code allows schools to withdraw the offer of a school place if parents/carers gave fraudulent or intentionally misleading information.**

Signed:

Print Name:

Title (Delete as appropriate) Mr/Mrs/Ms/Other

Mother/Father/Legal Guardian/Other

Date:

Route E: Other World Faiths

Name of child.....

Name of Religion.....

Name of the place of worship.....

For parent/carer:

How does your child participate in the life of your faith community?

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Is your child a regular worshipper in your faith community? **YES/NO**

Please give details

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**Please ask the leader of your faith community
to complete the form on Page 11**

Child's Name _____

Route E: Other World Faiths

TO BE COMPLETED BY THE LEADER OF THE WORLD FAITH COMMUNITY

Name of child.....

How does the child participate in the life of the faith community?

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Is the child a regular worshipper?

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Signed

Full name (block capitals)

Position held

Name of Place of Worship

Telephone number

Date

THANK YOU FOR YOUR ASSISTANCE IN COMPLETING THIS FORM

Closing date: Friday 31st October 2014

FOR COMPLETION BY ALL APPLICANTS

DECLARATION BY PARENT/CARER

If after making an application, any of the information given in the application form for admission, or religious enquiry form or any other form, letter or document associated with the application changes, then the Headteacher must be informed immediately. The Schools Admission Code allows admission authorities to withdraw the offer of a place if parents have given fraudulent or deliberately misleading information.

The Governing Body reserves the right to make enquiries regarding an applicant's religious practice and to seek verification of any information given on the application for admission form, religious enquiry form, letter or document associated with the application.

I confirm that the PERSONAL INFORMATION on Page 1 is correct.

Please note: signing this section confirms that you have checked and agree with the accuracy of the information provided for each place of worship. The Governing Body reserves the right to withdraw any offer made on the basis of false or inaccurate information

Signed:

Print Name:

Title (Delete as appropriate) Mr/Mrs/Ms/Other

Mother/Father/Legal Guardian/Other

Date:

A valid application to St. Hilda's is based on completing both the local authority common application form and this form by the due closing dates.

Has St. Hilda's been entered as a preference on the Home Local Authority form? YES NO

If you have not yet entered St. Hilda's as a preference, do you intend to? YES NO

Please return the Application Form by Friday 31st October 2014 to:

**The Admissions Clerk, St. Hilda's CE High School,
Croxteth Drive, Sefton Park, Liverpool L17 3AL**