



Courage

Forgiveness

Service

Kindness

Supplementary Information Form

This form is only to be used if you wish your application for admission to be considered on faith grounds. **This alone is not an application form for admission to the School.**

Name of Your Child			
Date of Birth		Gender	
Name of Parent(s)			
Address			
Telephone Number			
The place(s) of Worship attended by at least one parent and the named child.	Name		
	Address		
The name of the Vicar/Priest/Minister/Faith Leader	Name		
	Address		
Worship Attendance: How frequently do you attend worship with your child?	Weekly		
	Fortnightly		
	Monthly		
For how long have you been so attending?	One Year		
	Two Years		
	Three Years or More (please indicate)		

Please see Covid-19 variation to criteria 5 (Practising Christian)

I confirm that the details above are correct and understand that if any information is found to be falsified, that this may impact any offer of a placement.

Parent Signature and Date of Signing:

Faith Leader Signature and Date of Signing:



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