



Linby-cum-Papplewick C.E. Primary School



Love Life  
Love Learning  
Grow in Faith

Linby cum Papplewick  
C of E Aided Primary School,  
Quarry Lane,  
Linby,  
Nottingham  
NG15 8GA  
  
Tel : 0115 9634282

## Supplementary Information Form 2019-2020

**This document must be filled in by the person with whom the child resides.**

Family Name / Surname:	Child's First Names:
Address:	Post Code:
Telephone No:	Date of Birth:
Name(s) of person(s) making application:	Relationship to child:

**Please note it is important that the information requested below is given as comprehensively as possible because the application for a school place for your child can only be judged on the information provided and a Minister's reference if applicable.**

a) Do you attend Church worship?	YES	NO	If <u>yes</u> : which Church?
b) Have you attended worship at least two Sundays a month throughout the previous year?	YES	NO	
c) If applicable, please describe your specific personal involvement (other than worship) in the life and work of this Church.			
d) Have you attended worship at St Michael's Linby and / or St James' Papplewick at least six Sundays throughout the previous year?	YES	NO	
e) Please give the name and full address of your Minister to whom we shall write for a reference to confirm the information you have given in this section. (If you are new to the area please give your previous Minister's address.)			

I / we confirm that the information provided is correct.

Signature(s):

Date of application:

**PLEASE RETURN THIS FORM TO THE SCHOOL**