



**ST NICOLAS AND ST MARY C.E.  
VOLUNTARY AIDED PRIMARY SCHOOL**

**SUPPLEMENTARY INFORMATION FORM**

**(PLEASE NOTE THAT IF YOUR CHILD HAS A STATEMENT OF SPECIAL EDUCATIONAL NEED YOU SHOULD DISCUSS THE MATTER OF HIS/HER CHOICE OF SCHOOL DIRECTLY WITH THE WEST SUSSEX ADMISSIONS OFFICE IN THE FIRST INSTANCE.)**

Child's name in full (as per Birth Certificate) SURNAME .....

FORENAMES .....

**Date of Birth** ..... **Male/Female** (*delete as applicable*)

**Is your child looked after or previously looked after?** **Yes / No** (*delete as applicable*)

[**'Children Looked After'** are children who are in the care of the local authority (LA) as defined by section 22(1) of the Children's Act 1989. **'Previously looked after children'** means children who were looked after but ceased to be so because they were adopted or became subject to a child arrangements order or special guardianship order.]

**PARENT(S)/CARER(S)/GUARDIAN(S)**

Please give names of parent(s)/ carer(s) / guardian(s) who live(s) at the same address as the pupil or elsewhere.

1. SURNAME: ..... TITLE: .....

FORENAME: ..... RELATIONSHIP TO PUPIL: .....

FULL ADDRESS: .....

..... POST CODE: .....

HOME PHONE NUMBER: ..... WORK PHONE NUMBER: .....

MOBILE PHONE NUMBER: .....

EMAIL ADDRESS: .....

2. SURNAME: ..... TITLE: .....

FORENAME: ..... RELATIONSHIP TO PUPIL: .....

FULL ADDRESS: .....

..... POST CODE: .....

HOME PHONE NUMBER: ..... WORK PHONE NUMBER: .....

MOBILE PHONE NUMBER: .....

EMAIL ADDRESS: .....

**NAME(S) OF ANY BROTHERS OR SISTERS WHO WILL BE ATTENDING ST. NICOLAS AND ST. MARY SCHOOL AT THE TIME OF ADMISSION (Not to include brothers & sisters attending Little Fishes Nursery at the time of admission.)**

NAME: ..... Year Group .....

NAME: ..... Year Group.....

(Continues on next page)

NAME: ..... Year Group.....

NAME OF CHURCH AT WHICH YOU REGULARLY WORSHIP:

.....

**PLEASE GIVE THE NAME AND ADDRESS OF YOUR PARISH PRIEST OR MINISTER AND ASK HIM / HER TO SEND THE ENCLOSED COMPLETED CHURCH SUPPORT FORM TO ST NICOLAS AND ST MARY PRIMARY SCHOOL UNDER SEPARATE COVER TO ARRIVE NO LATER THAN 15<sup>TH</sup> JANUARY 2023.**

**In the event that during the period specified for attendance at worship the church 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 alternative premises have been available for public worship.**

TITLE: ..... INITIAL(S): ..... SURNAME: .....

ADDRESS: .....

..... POST CODE: .....

TELEPHONE NUMBER: .....

EMAIL ADDRESS: .....

PLEASE ADD ANY INFORMATION BRIEFLY WHICH MAY BE RELEVANT TO THIS APPLICATION:

.....

.....

.....

**REMINDER:**

- **Have you arranged for a church support form to be completed?** **YES/NO**  
*(This is required if applying under criteria 2, 3, 4 or 5)*
- **Have you completed the official West Sussex County Council application form online stating the school as one of your preferences?** **YES/NO**
- **Have you shown proof of address in the form of a utility bill, driving licence or bank statement?** **YES/NO**

SIGNED ..... DATE .....

**TO BE RETURNED TO ST NICOLAS & ST MARY PRIMARY SCHOOL BY 15<sup>TH</sup> JANUARY 2023**

To: The Governors (Admissions)  
St. Nicolas and St. Mary Primary School  
Eastern Avenue  
Shoreham-by-Sea  
West Sussex BN43 6PE