





**SNEINTON ST. STEPHEN'S  
CE PRIMARY SCHOOL**  
Windmill Lane  
Sneinton  
Nottingham NG2 4QW  
Tel: 0115 915 1370



**SOUTH WILFORD ENDOWED  
CE VA PRIMARY SCHOOL**  
Main Road  
Wilford  
Nottingham NG11 7AL  
Tel: 0115 915 2967/8



1. Please complete this form as well as the orange application form
2. Only complete this form, in addition to the orange form, if you are applying for a place at Sneinton St. Stephen's CE Primary School or South Wilford Endowed CE Primary School.
3. You should read the Admission Policy for the school (pages \*\*\*\* Going to School in Nottingham);
4. Please return this form to the school directly.

<b>First Name(s):</b>	<b>Surname/ Family Name:</b>	<b>DOB:</b>	<b>Gender:</b>
<b>Address:</b>			<b>Pupil ID:</b>
	<b>Home Tel No:</b>	<b>Mobile Tel No:</b>	
If any of the information entered above is incorrect, please enter changes here:			

**SECTION A - TYPES OF PLACES APPLIED FOR**

If you are applying for a place at South Wilford Endowed CE Primary, do you live within the Ancient Parish of Wilford? (A map of this area is available for viewing in the school office and on the school website [www.wilford.org](http://www.wilford.org) .)

YES  NO

**SECTION B - FAITH COMMITMENT**

*Complete this section if you have a religious commitment. However, it is not essential to have a religious commitment to apply for a place. Give the church information for both parents/carers and the child, especially if this is different.*

1. Which Church/Religious Group(s) do you attend? (Please give the full name and address of the church/religious group(s).  
 Name:..... Telephone No: .....  
 Address:.....
2. Which Church/Religious Group(s) does your child attend?  
 Name:..... Telephone No: .....  
 Address: .....
3. Please give the name and address of your parish priest, minister or equivalent religious leader who will be contacted to provide a reference. (Please give the full name and address )  
 Name: ..... Telephone No: .....  
 Address: ..... Post Code: .....  
 E-mail address (if known): .....

4. (a) How often do you attend your church/place of worship? *(Please indicate the normal pattern of attendance)*

Weekly       Fortnightly       Monthly       Occasionally

(b) How often does your child attend your church/place of worship? *(Please indicate the normal pattern of attendance)*

Weekly       Fortnightly       Monthly       Occasionally

### SECTION 3 - Declaration

I/We understand that the school(s) I/we have applied for is a Church of England School and I/we have read the school(s) information and understand its beliefs and aims:

Signature: ..... Date: .....

Full Name of Parent/Carer .....

**This form must be returned to the school directly.**



REFERENCE REQUEST FOR APPLICATION TO SNEINTON ST STEPHEN'S C OF E PRIMARY SCHOOL

THIS WILL BE AN OPEN REFERENCE-Please return this form to the school directly.

Name of Parent(s) / Carers:

Name of Child:

Address:

Present School:

Applicants for a faith priority place are asked to provide the name and address of their parish priest, minister or equivalent religious leader who will be willing to complete this reference form to confirm the level of their /their child's commitment to a church or religious group. The period in question should be the past year.

Please tick the appropriate box (see guidance set out below the statements):

	<u>Child</u>	<u>Parent/Carer(s)</u>
At the heart of the church / religious group	<input type="checkbox"/>	<input type="checkbox"/>
Attached to the church / religious group	<input type="checkbox"/>	<input type="checkbox"/>

- ❖ An applicant '**at the heart of the church/religious group**' would be a regular worshipper. This means one who worships usually twice a month. To accommodate difficult patterns of work and family relationships account will be taken of weekday worship.
- ❖ An applicant '**attached to the church/religious group**' may be a regular, but not frequent worshipper, for example one who usually attends a monthly family or religious parade service or is regularly involved in a weekday religious activity including an element of worship.

**SIGNATURES** – to be signed by two officers / leasers of the Church / Religious Group:

Church / Place of Worship:

\_\_\_\_\_

Name : \_\_\_\_\_

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Position: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_