

SUPPLEMENTARY INFORMATION FORM (SIF)

Please state the school year for which you are seeking admission Year (7/8/9/10/11) _____

Please complete this form if you are applying for a place under priorities 3 (Foundation), 5 (Medical/Social Need) or 6 (World Religions) in the school's oversubscription criteria. You do not need to complete this form if you are applying under any other priority.

Please note that this is not an application form. It will be used to determine the allocation of places during the transfer from Year 6 to Year 7 if there are more applications than there are places for, and to determine the correct place on the waiting list for all in-year applications.

place of the waiting list for a	iii iii year i	аррисанопо.		
Details of Child				
Christian/First Names			Surname	
Home address				
at time of application			Home Tel	
			Parent/carer Mobile No	
Post Code				
Parent/carer Email address			DOB	
For Office Use Only:		Date Received:		
Ministers signature:				

Sibling

Other Faith

Recorded Withdrawn

Looked After

Community

Not Accepted

Foundation Ripon

SEN

Social/Medical

Accepted

Foundation Harrogate

Outside of Deaneries:



Staff

Distance

Are you applying for a Foundation Place (see priority 3 in oversubscription criteria)						□Yes
Den	omination/Religion:					
	ee of worship in the lious tradition:					
	In the last three years how ofter religious tradition? (See Appendix 1)	Weekly	3	points)	
		2 – 3 times/month Monthly	2 1	points point		
	In the last three years how ofter in the religious tradition? (See Appendix 1)	n has a <u>parent or carer,</u> attend	ded a pl	ace of worsh	iip	
		Weekly	3	points		
		2 – 3 times/month Monthly	2 1	points point		
(Ple	st or Minister's signature confirmin ase be aware that the Governors se without a Church Leader's signa	will not be able to consider yo	our appli	cation for a I	oundation	
	idan's may contact Faith Leaders nge the confirmed frequency of att pol.					
thos alter atte	e:- In the event that during the peri- ce of other faiths, relevant place of mative premises for that worship, the indance will only apply to the period e of worship or alternative premise	worship has been closed for the requirements of these add d when the church or in relation	public w missions on to the	orship and harrangemer	nas not provided nts in relation to	
Sign	nature:-		Dated:-			
Nam	ne/Position:-					
Con	tact Number:-					
Ema	ail address:-					
Add	ress-	S	Stamp if	available:-		

Do you wish your child to be considered on social or medical grounds? (see priority 5 in oversubscription criteria)					□Yes	
	you applying for a World Re	ligion Place other th	an Christ	tianity (see p	riority 6 in	□Yes
Denc	omination/Religion:				_	
Place	e of worship:				_	
	In the last three years how often har religious tradition? (See Appendix 1)	as your <u>child</u> attended a _l	place of w	orship in the		
	(Coo Appendix 1)	Weekly	3	points		
		2 – 3 times/month Monthly	2 1	points point		
		WOTHIN	ı	point		
	In the last three years how often had in the religious tradition? (See Appendix 1)	as a <u>parent or carer,</u> atte	nded a pla	ace of worshi	p	
		Weekly	3	points		
		2 – 3 times/month Monthly	2 1	points point		
(Plea	Leader's signature confirming the a use be aware that the Governors will without a Faith Leader's signature)	not be able to consider y				
	ge the confirmed frequency of attend					
those alterr atten	e- In the event that during the period e of other faiths, relevant place of wo native premises for that worship, the dance will only apply to the period w e of worship or alternative premises h	rship has been closed for requirements of these ac hen the church or in rela	or public w dmissions tion to the	orship and has arrangement on the contract of	as not provided ts in relation to	
Signa	ature:-		Dated:-			
Nam	e/Position:-					
Conta	act Number:-					
Emai	I address:-					
Addr	ess-		Stamp if	available:-		

I/We confirm this application to	be accurate at the time of writing.
Name of parent(s)/carer(s)	
Signed	
Date	
	the Appeals Panel in the case of any appeal against non-admission. In all other is treated in confidence. If you have any difficulty completing the form please do not ions Team at the school.
Please return this form to:	
	Admissions St Aidan's Church of England High School
	Oatlands Drive Harrogate HG2 8JR
	Closing Date: (For Year 7 applications this is 31 st October of their Year 6 academic year)
(EU) 2016/679) and all int Further information can be School Websites and from	for the purposes of the General Data Protection Regulation (GDPR) (Regulation formation provided is held and controlled strictly in accordance with GDPR. found in the Trust's GDPR Privacy Notice which is available on the Trust and school offices. Further information on data protection and GDPR can be found mation Commissioner's Office Website at https://ico.org.uk/
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