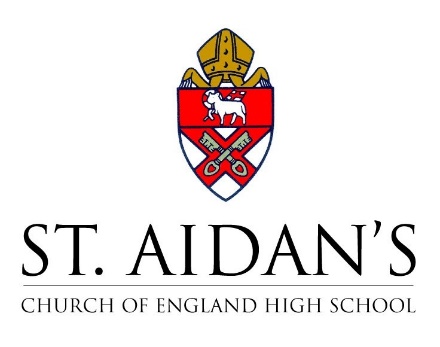
****

**SUPPLEMENTARY INFORMATION FORM (SIF)**

**Please note that this is not an application form.** The school processes applications using the personal details that are provided on the Local Authority Common Application Form (CAF). Please only complete this form to give us **supplementary** **information** if you are applying for a place under priorities 3 (Exceptional Life Challenging Circumstances), 4 (Foundation) and 5 (World Religions) in the school’s oversubscription criteria. **You do not need to complete this form if you are applying under any other priority.**

This form is made available to the Appeals Panel in the case of any appeal against non-admission. In all other respects the information given is treated in confidence. If you have any difficulty completing the form, please do not hesitate to contact the school’s Admissions Team.

**Child’s Details**

|  |  |
| --- | --- |
| Name of Child: |  |
| Date of Birth: |  |
| Address:  (as per Local Authority application form) |  |
| Year Group for Admission |  |

**Parent/Carer Details**

|  |  |
| --- | --- |
| Name: |  |
| Relationship with child: |  |
| Address: |  |
| Telephone number: |  |
| Email address: |  |
| Signature: |  |

|  |  |  |
| --- | --- | --- |
| **For Office use only:** | Date received |  |
| Priority 3 | Priority 4 | Priority 5 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Please complete the information below if you are applying for a FOUNDATION PLACE (Priority 4). Note faith leaders have requested that point boxes are to be ticked by them and not applicants.**  Place of worship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  |  | | --- | --- | --- | |  | In the last two years how often has the child named overleaf attended a place of worship in the religious tradition? |  | |  |  | |  | Frequently (3-4 times per month) 2 points |  | |  | Regularly (1-2 times per month) 1 point |  | |  |  |  | |  | In the last two years how often has a parent/carer of the child named overleaf attended a place of worship in the religious tradition? |  | |  | (See Appendix 1) | |  | Frequently (3-4 times per month) 2 points |  | |  | Regularly (1-2 times per month) 1 point |  | |  | Total Points (child + parent/carer) |  |   **Priest or Minister’s details confirming the pattern of worship stated above**  Minister/Faith Leader Name:    Place of Worship Address:  Place of Worship Email Address:  Place of Worship Telephone number:  Minister/Faith Leader Signature: |

Notes:

* Please complete the section in full, including the relevant minister/faith leader’s signature**. Without a signature the application will not qualify for a Foundation place.**
* The school may choose to contact the minister/faith leader to confirm the pattern of worship provided. In the event that the Faith Leader wishes to change the frequency of attendance this will be communicated to parents/carers by the school.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Please complete the information below if you are applying for a WORLD RELIGION PLACE (Priority 5) Note faith leaders have requested that boxes are to be ticked by them and not applicants.**  Denomination/Religion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Place of worship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   |  |  |  | | --- | --- | --- | |  | In the last two years how often has the child named overleaf attended a place of worship in the religious tradition? |  | |  |  | |  | Frequently (3-4 times per month) |  | |  | Regularly (1-2 times per month) |  | |  |  |  | |  | In the last two years how often has a parent/carer of the child named overleaf attended a place of worship in the religious tradition? |  | |  |  | |  | Frequently (3-4 times per month) |  | |  | Regularly (1-2 times per month) |  | |  |  |  |   **Faith Leader’s details confirming commitment to the faith**  Faith Leader Name:    Place of Worship Address:  Place of Worship Email Address:  Place of Worship Telephone number:  Faith Leader Signature: |

Notes:

* Please complete the section in full, including the relevant Faith Leader’s signature**. Without a signature the application will not qualify for a World Religion place.**
* The school may choose to contact the Faith Leader to confirm the pattern of worship provided. In the event that the Faith Leader wishes to change the frequency of attendance this will be communicated to parents/carers by the school.

**Section Two – Exceptional Life Challenging Circumstances Places (Priority 3)**

|  |  |
| --- | --- |
| **Do you wish your child to be considered for an Exceptional Life Challenging Circumstances Place?** | **Yes** |

The Admissions Committee can choose to admit up to 5 children per year group living within the Anglican Deaneries of Harrogate and Ripon with demonstrated exceptional life challenges which can only be met by St Aidan’s.

If you are applying for a place under this priority, please provide an accompanying note with this form, along with the requested information and professional supporting evidence listed under priority 3 of the St Aidan’s Oversubscription Criteria.

------------------------------------------------------------------------------------------------------------------------------

**Section Three - All applicants are required to sign and date below**

I/We confirm this application to be accurate at the time of writing.

**Name of parent(s)/carer(s)** …………………………………………………………………………………..

**Signed**  …………………………………….……………………………………………..

**Date** …………………………………………………

Please return this form either by email to [admissions@staidans.co.uk](mailto:admissions@staidans.co.uk) or deliver by hand to the school’s Main Reception.  If you chose to post the form, please use a guaranteed postal service and ensure that you contact the school to check safe receipt. The closing Date for submission of forms in support of Year 7 applications is the 31st October of the Year 6 academic year.

**YCST is the Data Controller for the purposes of the General Data Protection Regulation (GDPR) (Regulation (EU) 2016/679) and all information provided is held and controlled strictly in accordance with GDPR.  
Further information can be found in the Trust’s GDPR Privacy Notice which is available on the Trust and School Websites and from school offices. Further information on data protection and GDPR can be found on the Information Commissioner’s Office Website at** [**https://ico.org.uk/**](https://ico.org.uk/)

Part of Yorkshire Causeway Schools Trust, a charitable company limited by guarantee registered in England and Wales with company number: 07663935