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Data
Protection
Act 1998

WARNING: The Authority is under a duty to protect the public funds it administers and to this end may use the information you have provided on this form within its Authority for the prevention and detection of fraud. It may also share this information with other bodies administering public funds solely for these purposes.

TSM's Religious Affiliation Form - Reception

If you wish to apply to Trinity St. Mary's C.E. Primary School, under the religious affiliation category in the Admission criteria, please complete this form

PLEASE COMPLETE IN **BLOCK CAPITALS** USING **BLACK INK**

1. Details of Child				
Surname			First Name(s)	
Date of Birth	/	/	Boy ☐	Girl ☐ Please tick

2. Details of Parent(s) or Guardian(s) With Whom Child Lives						
Surname			Initials		Mr/Mrs/Miss/Ms	
Telephone No.		Mobile No.			Relationship to child	
Address:						

3. Place of Worship - one of parents / guardians regularly attends	
Name of place of worship:	
Address:	
Name of Vicar / Priest / Minister / Faith Leader / Church Officer:	
Denomination:	
Address:	
Post Code:	Telephone No:

4. Worship Attendance	
Please tick if you have attended a minimum of 1 service per month at least 1 year prior to the closing date for application as in criteria. ☐	
A letter from your incumbent or minister or other church officer is required as proof of this attendance.	
Please tick if the letter is attached. ☐	

5. Special Medical or Social Circumstances	
Tick here if you are applying under this criterion ☐	
Give details of professional evidence submitted:	

Please return this form directly to the school office along with the application form.