



St Leonard's C.E. Primary School

Southwark Diocesan
Board of Education
Multi-Academy Trust



"Nurturing Faith and Inspiring Success"

Mitcham Lane, Streatham, SW16 6NP

Supplementary Information Form

To be completed by applicants applying under criteria 2, 3 and 5 and returned to school by post or hand delivered 15th January 2020. Please note that this form is to be completed in addition to your home borough's online Common Application Form. The deadline for this is also 15th January 2020.

Child's First Name		Child's Surname	
Child's Date of Birth			
Parent/Carer's First Name		Parent/Carer's Surname	
Parent/Carer's Home Address			
Mobile number		Home Number	

Church Attendance

Families should be regular* worshippers at one of the following churches: (Please tick)

(*Regular at least twice a month for the last two years)

St Leonard's Church		St Alban's Church		St James' Church		St Paul's Church	
Mitcham Lane Baptist		St Peter's Church		Streatham Baptist Church		Streatham Methodist Church	

Are you on the Electoral Role? (Church of England Churches)	Yes / No	Are you on the Members List? (Baptist or Methodist Churches)	Yes / No
Are you a member of Churches Together in England or Evangelical Alliance?	Yes / No	Have you attended fortnightly for the last two years?	Yes / No

Please name your church below if not listed above	
Name of Priest / Minister	
Home address of Priest / Minister	
Telephone number of Priest/Minister	



Accredited
School
2017 - 2020



South Lambeth
Schools Partnership





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I confirm that the information given is correct and that I have read the admission policy.

Parent/Carer's Signature	
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Date	
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For the attention of the Priest / Minister only
Priest / Minister Reference

Do you agree with the Parents/Carers information in relation to Church attendance?	Yes / No
If no, please state where your view differs from that of the parent / Carer.	

Is your Church a member of the Church of England?	Yes	No
Or		
Is your Church a member of Churches together in England?	Yes	No
Or		
Is your Church a member of the Evangelical Alliance?	Yes	No
Please supply registration number if applicable		

Name in print		Signature	
Date			

Official Church Stamp



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