




TRINITY
CHURCH OF ENGLAND HIGH SCHOOL

National Teaching School
designated by

National College for
Teaching & Leadership

Higher Cambridge Street, Manchester, M15 6HP

Tel. 0161 212 1900

www.trinityhigh.com

SUPPLEMENTARY APPLICATION FORM FOR 2020 ADMISSIONS

Guidance Notes for the Completion of this Form

- All the relevant sections should be completed clearly in BLOCK CAPITALS.
- If you are asking your minister or religious leader to act as a referee you should make sure that their section is completed by them and handed back to you.
- This supplementary form must be returned to Trinity CE High School.
- The common application form must have Trinity named in it and be submitted to your Local Authority.
- You are responsible for making sure both forms are returned by **31st October 2019**.

The full details of the application process and admissions policy for each annual intake are on the school website. Please read before completing this form. There are two grounds of application, and you need to decide which your application is based on:

Either; religious commitment. If you have a religious leader, please ask him or her to complete **Section A**.
The parent/carer should complete **Section B**.

Or; on grounds of the student having an Education and Health Care Plan, formerly known as a statement of special educational needs or if the student is or was previously Looked After (in Public Care). **Section C** should be completed.

Student's surname: _____

Student's forename(s): _____

Preferred forename: _____

Date of birth: _____ Boy Girl (Please tick)

Address: _____

Postcode: _____

Mobile: _____ Telephone: _____

Email Address: _____

Primary school attending: _____

Please name any brothers or sisters at present attending

Trinity C of E High School:

_____ in year(s) _____

Office Use			
Category of application	ID number	Receipt given?	Inputted into system?

Section A – If you attend a place of worship, this religious reference section should be completed by your Priest/Minister/ Religious Leader. Parents do not complete this section.

- Would the person to whom this form is given please complete this section and hand it back to the parent.
- Parents/guardians are then responsible for returning the completed form to Trinity by the closing date: **31st October 2019**

1. How frequently does this child attend your place of worship?

- a) Weekly or more d) Rarely
b) Fortnightly e) Never
c) Monthly

Please tick a, b, c, d or e as appropriate.

2. For how many years has this attendance been sustained? _____

3. How frequently does one of the child's parents/guardians attend for worship?

- a) Weekly or more d) Rarely
b) Fortnightly e) Never
c) Monthly

Please tick a, b, c, d or e as appropriate.

4. For how many years has this attendance been sustained? _____

5. Are there any other reasons for commending this child? It would be helpful for any relevant information to be included here, especially involvement in church and other faith activities. (Please do not comment on the ability of the child).

6. Please tick this box if either you or the applicant have moved in the last two years. (If this is the case, and you cannot confirm their attendance before this time, applicants should provide you with the necessary information.)

Signed: _____ Date: _____

Priest/Minister/Pastor/Rabbi/Pandit/Imam/other (please state): _____

Name of the place of worship: _____

Your name: _____

Address: _____

Telephone Number: _____

Christian Denomination or other Religion:

Please endorse with the Official Stamp of the Church or Place of Worship.

Section B – To be completed by the parent/carer if the application is on religious grounds.

Christian Denomination or other religion: _____

If different than Section A, please give reasons why: _____

If this has changed in the last two years, please also state where you attended previously:

Copies of any of the following can be submitted in support of your application: Certificate of Baptism, Certificate of Confirmation, confirmation of church membership, etc.

Any other details you would like to have considered:

(If you have recently moved to Manchester or have changed your place of worship, an additional copy of Section A can be provided to evidence this.)

Section C – To be completed if the applicant has an Education and Health Care Plan (EHCP) or was/is Looked After (in Public Care).

Documentary evidence is required. Please enclose documentary evidence in support of your application.

State why you are applying under this section:

To be completed by all parents/carers:

I give permission for my child's primary school to share my child's educational records with Trinity CE High School in relation to this application:

Yes No

I apply for a place for my child at Trinity C of E High School in September, 2020:

Signed: _____ **Dated:** _____

Print Name: _____ **Mr/Mrs/Ms/Miss/Dr/Rev**

Any other relevant information:

REMEMBER, this form must be completed and returned to school by 31st October, 2019. You will receive a receipt at the reception desk in school if you hand in the application form. If you send the application form via e-mail or post, a receipt will be e-mailed to you.

