

Supplementary Information Form (SIF)

IF YOU ARE APPLYING FOR A RECEPTION PLACE FOR SEPTEMBER 2024 YOU <u>MUST</u> COMPLETE A LOCAL AUTHORITY COMMON APPLICATION FORM (CAF) BY JANUARY 2024 (you may complete your CAF online at www.eadmissions.org.uk)

You should also complete this Supplementary Information Form (SIF) if any of the following apply:

- 1. Children whose parents are committed members of All Soul's Harlesden, St Matthew's Willesden or St Michael's Stonebridge.
- 2. Children whose parents are committed members in another Anglican Church.
- 3. Children whose parents are committed members in churches and chapels of other Christian denominations, which are members of or affiliated to Churches Together in Britain and Ireland and the Evangelical Alliance.

In the event that the School is over-subscribed, this information will help the Governors decide if the child's application should be considered under over-subscription criterion D in the School's admission arrangements (available from the School website or office). For this information to be considered:

- the Declaration below must be signed by a person with parental responsibility for the child; and - the Religious Reference Statement overleaf must be completed, signed and stamped by the leader of your place of worship. If you would like attendance at more than one place of worship to be taken into account, please provide additional statements demonstrating cumulative attendance at weekly services at St Mark's, St Martin's or a place of worship of another Christian denomination or other world faith on at least 26 occasions in each of the past two years; and

This form (and any other religious reference statements that you would like to be taken into account) must be returned to the School office.

<u>Declaration</u>		
The information that I have provided on this Supplementary Information Form (SIF) is true and correct. I will inform the School immediately of any changes which may arise.		
Signed		
Date: Print name: (by person with parental responsibility for the applicant):		
Child's name:	Date of birth:	
Address:		
Telephone (home and mobile):		
Email address:		
Siblings Yes / No	If YES, which Year Group:	



Child's Name

D O B

I enclose a form for the clergy reference for a young member of your congregation who is applying for a place at John Keble School. I would be most grateful if you would fill in the form and return it to the school as soon as possible. Please note that the clergy referee should NOT be directly related to the child (e.g. parent or grandparent).

Clergy who are new to London may not be aware of the extent to which Church schools are over-subscribed, and how much depends on a clergy reference. The Governors' admission criteria rely on accurate information rather than a subjective recommendation. Please ensure that the form is completed as fully as possible, and returned directly to the school.

The admissions criteria distinguish between Church of England applicants and those who are full members of churches that belong to Churches Together in Britain and Ireland or the Evangelical Alliance. Please state clearly inside whether your church belongs to one of the above organisations, and please supply evidence of membership. The Governors' admissions policy which clarifies the nature of the school and the admissions criteria for Church places can be found on the school website www.johnkeble.com. Thank you very much for your help.

Yours sincerely,

Catherine Allard

Head Teacher John Keble School



John Keble School Supplementary Information Form

Child's Name:	D.O.B.	
Name of Church:		
Denomination of Church:		
Name of Minister:		
Full Address of Church:		
Postcode:		
Telephone number:		
NB: The clergy referee should not be directly related to the child (e.g. Parent, Grandparent, sibling etc). Please use BLOCK CAPITALS and answer ALL questions		

PLEASE COMPLETE THIS SECTION FOR THE 'OTHER CHURCH' CATEGORY

Is this church a member of Churches Together in Britain and Ireland (CTBI)? YES / NO

Is this church a member of The Evangelical Alliance? YES / NO

Evangelical Alliance Membership Number Mandatory

Please provide evidence of membership, e.g. the Evangelical Alliance membership number of your Church or the affiliation to the Churches Together in Britain and Ireland (CTBI) of your Church, as any doubt about membership may prevent a child from being offered a place at the school.

Please only refer to ONE parent /guardian

Name of Parent / Guardian:

How long have you known this family personally? years

Please answer all questions as this information is vital in applying our admission criteria.



If you have not been in the parish yourself since the child first came, please ask other established members of your church community to help you.

Child

- 1. Is the child above known to you as a member of your church? YES / NO
- 2. Is there a Sunday school at your church? YES / NO
 If there is a Sunday school, does s/he attend Sunday school? * YES / NO * including other
 activities in Church taking place during the Church service
 If there is no Sunday school, does s/he attend church with a parent YES / NO
- 3. Please state whether s/he attends weekly or fortnightly weekly is 40 weeks or more per year i.e. usually weekly with allowance for holidays, illness and other reasons, fortnightly is 20 weeks or more per year. How long has s/he been attending at this frequency? At least 5 years Under 5 years but at least 2 years Under 2 years

4. Is s/he baptised? (or alternative If it is not usual to baptise young children in you whether any comparable ceremony such as de	
Name of referee:	
Position in Church:	
Signature:	Date:
Church official stamp:	

Thank you for your assistance.

Please return the completed form directly to the school ASAP by post or to admin@jkeble.brent.sch.uk.