

SUPPORTING INFORMATION FORM

This form needs to be sent to St Regis Church of England Academy

Please use block capitals when completing the below. If you need any assistance completing this form, please contact us at 01902 558333 or admin@stregisacademy.org.

STUDENT DETAILS					
Surname of child:		Forename:			
Middle name(s):		Date of Birth:			
Gender: please tick	Ma	ale		Female	
Full name of Parent/Carer:					
Address: (where the child normally resides)					
Postcode:					
Daytime contact number:		Email address:			
Name of current school:					
Name of sibling(s) attending St Regis:					
Year group:					
Does your child have an Educational Health Care Plan (EHCP) from a local authority?					
Yes		1	No		
Is your child a looked after child (LAC) in foster care?					
Yes		1	No		

Before completing the remainder of this form, please ensure you have read the Admissions Criteria carefully.

Are you applying for a FOUNDATION place?	
Category A – 40 Places (for practicing Church of England families)	Please tick the appropriate category. You can apply under more than one category.
YES, I would like to apply for a	3.7
FOUNDATION place.	
Please answer all questions 1-4.	
Are you applying for a GOVERNOR'S place?	
Category B – 30 Places (for practicing members of	
other recognised Christian denominations)	
YES, I would like to apply for a GOVERNOR'S place.	
Please answer all questions 1-4.	
Are you applying for a FAITH COMMUNITY place?	
Category C – 20 Places (for practicing members of other world religions)	
YES, I would like to apply for a	
FAITH COMMUNITY place.	
Please answer all questions 1-4.	
Are you applying for an OPEN place?	
Category D – 60 Places (for families of any faith or no	ne seeking an education based on
Christian ethos)	
YES, I would like to apply for an OPI	EN place.
If this is the ONLY category you have selected, an	swer questions 3-4. If you have
applied under any of the above categories, please	answer all questions 1-4.

QUESTION 1 ONLY REQUIRED FOR THOSE WHO HAVE SELECTED CATEGORIES A, B AND C ABOVE.	Name place of worship:			
Please indicate frequency of worship for CHILD: please circle	Please indicate frequency of worship for FAMILY : please circle			
Daily	Daily			
Weekly	Weekly			
Monthly	Monthly			
Occasionally	Occasionally			
QUESTION 2 ONLY REQUIRED FOR THOSE WHO HAVE SELECTED CATEGORIES A, B AND C ABOVE.	Name and position:			
TO BE COMPLETED BY VICAR/FAITH LEADER				
Place of worship:				
Is there evidence of family commitment to circle	the church/faith community? please			
Very Strong				
Strong				
Reasonable				
Little/No				
Please add any comments that you wish to make in the space below.				
Vicar/Faith Leader Comments:				

Official Stamp/Signature:
Please continue on a separate sheet if necessary.
QUESTION 3
Why is a Church of England School Important to you?
QUESTION 4
Please provide evidence of any educational, school or medical needs that you
wish us to be aware of. Attach relevant information.

To the best of my knowledge and belief, the information I have provided on this form is correct.
Signed(Parent/Carer)
Date
PLEASE COMPLETE THE CHECKLIST BELOW
My faith leader has completed question 2 (If applying for a place under Category A, B or C)
I have named St Regis CofE Academy on the In Year Application Form (INCAF) and returned it to the local authority.
I have signed and dated the form.
When completed, please return the form with any additional information (and a stamped addressed envelope if an acknowledgement is required) to:
The Admissions Officer St Regis Church of England Academy Regis Road Tettenhall
Wolverhampton, WV6 8XG
Please add any further comments below