The Church of England Diocese of Sheffield

Additional Information
to make an Application for a Church of England Aided School

PLEASE COMPLETE IN BLOCK CAPITALS

Name of Pupil for whom application is made .................................................................

1. Is the application for a local school? ☐ YES ☐ NO

2a. Are you a member of a Christian Denomination/World Faith? ☐ YES ☐ NO

2b. If yes please name the Christian Denomination/World Faith. ........................................

3a. If appropriate Please name your present parish/place of worship ...................................

3b. How frequently have you attended this place of worship and for how long? .....................

4. Is this application made because you want a Christian education for your child? (Because you want your child to be educated within a Church of England School?) ☐ YES ☐ NO

5a. Is this application being made because of a regular pattern of worship by parents/carers (at least once a month over the past two years) or by the child him/herself (at least once a month over the past twelve months)? ☐ YES ☐ NO

5b. If yes please complete the Minister’s Referral form over page and then ask your minister of religion to countersign it.

Full Name and signature of person(s) completing this form:

Name ..............................................................

Signature ..............................................................
Minister of Religion Referral Form

Name of child: ..........................................................................................................................

Name(s) of parent/carer ...........................................................................................................

Address of parent/carer ..........................................................................................................

In determining faith admission applications priority is given to:-

a) those children whose parents/carers can prove a long-standing and regular pattern of
worship at any public place of worship. This is defined as worship by at least one
parent/carer at least once a month over the last two years.

b) Those children who have attended on average once a month a place of public worship
(e.g. church, Sunday School, Mosque, Temple.)

The parents/carers are asked to complete the details below at Section 1 and then ask their
minister of religion to countersign the form at Section 2.

Section 1

a) We the parent/carer(s) of __________________________ have/have not worshipped
at least once a month for the last two years at ________________________________

b) Our child (name of child) __________________________ has/has not attended a
place of public worship once a month for the previous twelve months.

Signed (parent/carer) __________________________ Date __________________________

Section 2

Countersign by minister of religion .........................................................................................

Date __________________________

Name of minister of religion __________________________

Tel Number __________________________

Address ................................................................................................................................

Any other comments ..............................................................................................................

Thank you for your help

Sheffield City Council • Children and Young People and Families Service • Pupil Admissions
Tel: 0114 273 5766 • This document is printed on paper from a sustainable source• www.sheffield.gov.uk