

## **Great Gaddesden C of E (VA) Primary School**

# Supplementary Information Form : School Year 2024/25

For entrance to the Nursery class in September 2024 (or mid-year), this form should be completed and returned to the school office.

- Please indicate the criteria under which the application is being submitted.
- Please ensure supporting evidence, if appropriate, is attached to this form when submitted to the school.

Child details		
Surname .		
First name(s)		
Date of birth	Male or Female	
Address of family home (includ	ing postcode)	
Date required for admittance	cluding pre-school /nursery, please give details :	
Parents/Guardian details : Su	ırname	
Fir	est Name:	
Tit	le	
Tel	ephone number(s)	
Em	ail address	

Parents/Guardian details : Surname	
First Name	:
Title	•
Telephone n	umber(s)
Email addres	ss

#### Criteria 1

Children at the time of admission, who have a sibling attending Great Gaddesden Primary School.

Yes / No (delete as applicable)

### Criteria 2 a)

Children who live in the Parish of Great Gaddesden and Nettleden

a) parent(s)/guardian(s) have attended services at their parish church or place of worship at least once a month during the previous two years

Yes / No (delete as applicable)

#### Criteria 2 b)

Children who live in the Parish of Great Gaddesden and Nettleden

b) geographic proximity. Children who do live in the Parish of Great Gaddesden and Nettleden, but do **not** attend services at their parish church or place of worship.

Yes / No (delete as applicable)

#### Criteria 3

Children who do **not** live in the Parish of Great Gaddesden and Nettleden **but have attended services** at their parish church or place of worship at least once a month during the previous two years.

Yes / No (delete as applicable)

Criteria 4	
All other children	
Yes / No (delete as applicable)	
	-
Signature of Parent:	
Signature	
Print Name	
Date	