BISHOP PERRIN C of E PRIMARY SCHOOL SUPPLEMENTARY INFORMATION FORM 2027 Entry

TO BE COMPLETED FOR THOSE APPLYING FOR A FOUNDATION (Church Supported) PLACE ONLY

For Reception 2027 Admission If applying for a **Foundation** (Church Supported) place you must also complete and submit this form by **15 January 2027** and return to the school at the address below. Please also complete the **Common Application Form** available online from your home Local Authority by **15 January 2027.**

For In-Year Admission please complete an online **In-Year Application Form** available from The London Borough of Richmond / Achieving for Children team. If applying for a **Foundation** (Church Supported) place you must also complete this form and return to the address below.

Section 1 to be completed by the child's parent/carer:

Child's First Name .....

Child's Last Name .....**Date of Birth**.....

Home Address .....

Post Code ..... **Telephone Number** .....

Email Address .....

Signed ..... (Parent/Carer) Date**:** .....

Section 2 to be completed by the Minister at your regular place of worship:

(Please note: this section cannot be completed by the parent / carer of the child applying even if that parent / carer is a practising minister)

The parent / carer of the child named above wishes to apply for a place at Bishop Perrin Church of England Primary School under the Foundation (Church-supported) admission criterion. Would you kindly complete this section and either return direct to school or to the parent/carer? Thank you kindly for your assistance.

Name of Church (please tick):

- St. Augustine of Canterbury, Whitton
- Ss. Philip & James, Whitton
- Other: Churches or chapels which are members of Churches Together in Whitton (CTiW)
- Other: Any C of E church within a 3-mile radius of the school

If Other please state the name and address of your parish:

Has the child **and** one or both parents/carers worshipped for **at least twice every month for the last two consecutive years**?

Yes / No

If they have not worshipped for the required two years please state the approximate dates of attendance:

Signature of Minister: Date:

This form once completed should be returned to Bishop Perrin C of E Primary School, Hospital Bridge Road, Twickenham, TW2 6LF by 15 January 2027.