

Executive Headteacher: Miss C.L. Mann **Head of School:** Mrs J. Statham

Address: 116 Churchbury Lane, Enfield, EN1 3UL

Telephone: 020 8363 5003

Email: admin@st-andrews-enfield.enfield.sch.uk

SUPPLEMENTARY INFORMATION FORM 2024 – Applying for a place under category 2 or 4

It is essential that you complete an online Location Authority application in addition to this form. The online Local Authority form can be found at https://www.eadmissions.org.uk and applications must be completed by 15th January 2024.

This supplementary information form must be returned to St. Andrew's school **by 15th January 2024**. No application received after this date will be considered.

The School Admissions Categories will be applied to an application should a vacancy occur during a school year and if there are more applications than available places.

Please read the Admissions Categories carefully, before completing this form. Please complete this form in capital letters in black pen.

Child's S	Surname		Child's First N	lame(s)	
Child's Date of Birth (date/month/year)		:h/year)	Boy/Girl	Boy/Girl	
Child's F	Permanent Address inclu	ıding Postcode (at time	e of application)	_	
	hool must be informed i	f the child's address ch	anges prior to the adı	mission	
Home T	elephone Number				
ame o	of Parent or Adult wit	th Parental Respon	sibility		
Title	First Name	Surn	name	Mobile To	Mobile Telephone No
	ndicate which categ		plying under, for y	your child to be admi	itted to the main
	by circling the number	er below.			
	_	4			



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Your priest/minister must sign below, confirming regular church attendance as defined in the Admissions Policy, if you wish for your application to be considered on the basis of regular parental or guardian worship at

Category 2 St. Andrew's Church, Enfield,

Category 4 Enfield Baptist Church

Enfield Citadel (Salvation Army)
Enfield Town Community Church
St. Mary Magdalene Church, Enfield

Trinity Church, Enfield

Name of Church, including address and church stamp	Number of times po at least one parent, Sunday worship		Length of time this pattern of worship has continued (years and months)
Name of priest/minister		Signature of priest/minister	
Date			

Declaration I confirm that:

- The information given on this form and any information provided to a priest/minister in support of this application, is correct to the best of my knowledge and belief.
- I have read and understood the School Admissions Policy.
- I have completed this form in accordance with the School Admissions Policy.

Name of parent/guardian	Signature of parent/guardian	Date

Please note:

In the event that during the period specified for attendance at worship the church has been closed for public worship and has not provided alternative premises for that worship, the requirements of these admissions arrangements in relation to attendance will only apply to the period when the church or alternative premises have been available for public worship.