



Abbey Grange Church of England Academy

Butcher Hill, Leeds, LS16 5EA

0113 275 7877

Supplementary Information Form  
for entry to the academy in September 2020

Closing date for receipt is 31 October 2019

Child's Legal Surname:

Gender:

Child's Legal Forename(s):

Date of Birth:

Parent/Carer Name:

Address:

Postcode:

Tel/Mob No:

Parent/Carer Email Address:

You should read and complete this form in conjunction with our admissions policy for 2020. Failure to correctly complete this form may affect your application as governors will not be able to rank your application against the faith oversubscription criteria.

**All applicants should fill in sections 1 to 4 as fully as possible and should sign and date the reverse.**

1. Please list here any brother or sister who will be at Abbey Grange C of E Academy in years 8 – 11 in September 2020.

Full Name:

Year:  
Form:

2. Attendance of <sup>1</sup>immediate family members at worship:  
please tick the box which you think best describes your situation.

At the heart of the Church/Place of Worship  
*This means someone whose family worships twice a month or more.  
The worshipper might be the child or one or more parents/carers.*

Attached to the Church /Place of Worship  
*This means someone whose family worships at least once every 2 months. The worshipper might  
be the child or one or more parents/carers.*

<sup>1</sup>Immediate family is defined as parents/carers or brothers or sisters of the child.

For how long?

More than 2 years

Less than 2 years:

If less than 2 years, please also provide  
details of your previous church if  
applicable.

3. Please indicate which Church or Place of Worship you usually attend.

Your Religious Denomination:

Your Church or Place of  
Worship's Name:

Address:

4. Please give the name and contact details of your Vicar/Minister/Faith Leader to whom we can contact to request information about your Church/Place of Worship attendance. Please provide a church/place of worship email address where possible (email addresses that are not published on the Church/Place of Worship website or do not contain the Church/Place of Worship name will not be accepted). *We recommend that you contact your Faith Leader before returning this form; note that he/she will be sent a separate form.*

Name of Vicar/Minister/Faith  
leader:

Church Email Address:

Address:

Tel/Mob No:

Please sign below to give permission to share your details with the faith leader you have named above.

Parent/Carer Signed:

Date:

Please return this form to: Admissions, Abbey Grange Church of England Academy,  
Butcher Hill, Leeds, LS16 5EA or [info@abbeygrangeacademy.co.uk](mailto:info@abbeygrangeacademy.co.uk) Closing date for receipt  
is 31 October 2019

**PRIVACY NOTICE:** For information on how we collect, store and use personal data you  
provide; please refer to our 'Privacy Notice for Students' and 'Privacy Notice for  
Parents/Carers' available on our website at [www.abbeygrangeacademy.co.uk](http://www.abbeygrangeacademy.co.uk) or on request  
from the academy office