



CHILD'S NAME

# ST HILDA'S CHURCH OF ENGLAND HIGH SCHOOL

## SUPPLEMENTARY INFORMATION FORM FOR IN YEAR ADMISSION 2024-25

- Please complete this form having first read St Hilda's Admissions Policy 2024
- Tick the criteria below you are applying under
- Complete the relevant sections on Pages 1-9 then complete and sign Page 9
- Return the form to St Hilda's (If posting, please check you have paid the correct postage)

Please tick the criterion/criteria under which you are applying - you can apply by more than one criterion

Criterion	Criterion	Number of places	Tick here
A	Education, Health & Care Plan	Places allocated automatically as required on receipt of relevant proof	
B	Children in Care and Previously Looked After Children		
C	Children of Staff at the School		
D1	Christian	Up to 150	
D2	Other World Faiths – Muslim	Up to 10	
D3	Other World Faiths	Up to 10	
E	All Other Applicants		

### CHILD'S DETAILS

<b>Surname</b>				
<b>Forename/s</b>				
<b>Date of Birth</b>	Day	Month	Year	<b>Gender</b> <i>please circle</i>
				Male    Female
<b>Address Inc Postcode</b>				
<b>Year Group</b>				

### PARENT/CARER DETAILS

<b>Surname</b>				
<b>Forename</b>				
<b>Relationship to Child</b>				
<b>Address</b> <i>if different to child</i>				
<b>Contact Numbers</b>	<b>Home</b>		<b>Mobile</b>	

<b>Email</b>	
<b>CHILD'S NAME</b>	

<b>Criterion A</b>	<b>Education, Health &amp; Care Plan</b>
<p>Are you in possession of an education, health &amp; care plan <b>which names St Hilda's</b> following consultation with the local authority?</p> <p><b>Places will be allocated automatically on receipt of relevant proof.</b></p>	<p>Please tick</p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>

<b>Criterion B</b>	<b>Children in Care and Previously Looked After Children</b>
<p>"Looked after child", "previously looked after children" and any child who was previously looked after but immediately after being looked after became subject to an adoption, residence or special guardianship order. 'Looked after' means that the child was (a) in the care of a local authority, or (b) being provided with accommodation by a local authority in the exercise of their social services functions.</p> <p><b>Please state the name of the responsible local authority and give brief details.</b></p> <p>Criterion B also includes looked after children and all previously looked after children who appear (to the admission authority) to have been in state care outside of England and ceased to be in state care as a result of being adopted.</p> <p>For "Internationally adopted previously looked after children (IAPLAC)", please tick if a local authority or Virtual School Head has previously had any involvement with the child and provide a relevant contact, if possible.</p> <p>It may be necessary for St Hilda's to request evidence of IAPLAC status from parents.</p>	<p>Please tick and give details where requested</p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p>

<b>Criterion C</b>	<b>Children of Staff at the School</b>	
<p>Have you been employed at St Hilda's for two or more years?</p> <p><i>or</i></p> <p>Were you recruited to fill a vacant post for which there is a demonstrable skill shortage or clear need to retain staff in that area?</p>	<p>Please tick</p> <p>YES <input type="checkbox"/>      NO <input type="checkbox"/></p> <p>YES <input type="checkbox"/>      NO <input type="checkbox"/></p>	

<b>CHILD'S NAME</b>	
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<b>Criterion D1</b>	<b>Christian</b>
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<b>Name of parent/carer** with the most involvement/ commitments to the life and worship of the church</b>	
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	<b>CHILD Church attendance information</b>		<b>PARENT / CARER Church attendance information</b>	
<b>Denomination</b> Anglican, Catholic, etc				
<b>Church you attend at present</b>				
<b>Dates attended from/to</b>	<b>From</b>		<b>From</b>	
	<b>To</b>		<b>To</b>	
<b>Name/s and dates of previous churches</b> <i>if applicable</i>				

How often does the parent/carer\*\* attend church and how often does the child attend church (we accept Sunday School attendance as church attendance)? Please tick the most appropriate attendance pattern in the table below. **If no one option is applicable please indicate your attendance pattern overleaf (or on a separate sheet and attach to your supplementary information form).**

\*In the event that during the period specified for attendance at worship the church or, in relation to those of other faiths, relevant place of worship 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, in relation to those of other faiths, relevant place of worship or alternative premises have been available for public worship.

Attendance Pattern	2021*		2022		2023	
	Child	Parent/ Carer	Child	Parent/ Carer	Child	Parent/ Carer
Weekly						
3 times each month						
Fortnightly						
Monthly						
Occasionally						
Never						

**\*\*the person who has legal responsibility for the child**

**CHILD'S NAME**

**If no one option of church attendance shown on the previous page is applicable, please indicate the attendance pattern here (or on a separate sheet and attach to your supplementary information form). Also indicate if your church does not offer a weekly service.**

**Please now ask your family's vicar/priest/pastor/minister/lay Eucharistic minister, catechist, deacon or church warden to complete Pages 6 & 7. A copy must be supplied for each church listed. Please give them the form in good time as they may need to verify the information. We do not accept 'pp' signatures.**

**NB: PAGES 6 & 7 MUST INCLUDE A CHURCH STAMP  
(OR SIGNED LETTERHEAD IF NO STAMP IS AVAILABLE)**

<b>CHILD'S NAME</b>	
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<b>Criterion D1</b>	<b>Christian</b>
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**Pages 6 & 7 are to be completed by the vicar/priest/pastor/minister/ lay Eucharistic minister, catechist, deacon or church warden. Each page should bear the church stamp where indicated.**

We strongly recommend the details are discussed with the parent/carer before final completion. Please provide information only about attendance **at your own church**, drawing either on your own personal knowledge or (if you were not at the church at the time) on information you have been able to **confirm personally** with other church officials. Please ensure the information is as accurate as possible. Please check the details of any information for this supplementary information form and feel free to contact school in the event of any query. All references are no longer confidential. Please note we do not accept 'pp' signatures. Thank you.

<p><b>CHURCH STAMP</b>  <b>NB: also stamp Page 7</b></p> <p><b>(if no stamp is available, please confirm this on a signed letterhead)</b></p>	
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<b>Name of child</b>	
<b>Name of parent/carer with the most involvement/ commitments to the life and worship of the church</b>	
<b>Has this form been handed to you personally?</b>	YES <input type="checkbox"/> NO <input type="checkbox"/>

How often does the parent/carer attend church and how often does the child attend church (we accept Sunday School attendance as church attendance)? Please tick the most appropriate attendance pattern in the table below.

\*In the event that during the period specified for attendance at worship the church or, in relation to those of other faiths, relevant place of worship 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, in relation to those of other faiths, relevant place of worship or alternative premises have been available for public worship.

<b>CHILD'S NAME</b>	
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<b>Attendance Pattern</b>	<b>2021*</b>		<b>2022</b>		<b>2023</b>	
	<b>Child</b>	<b>Parent/ Carer</b>	<b>Child</b>	<b>Parent/ Carer</b>	<b>Child</b>	<b>Parent/ Carer</b>
Weekly						
3 times each month						
Fortnightly						
Monthly						
Occasionally						
Never						

**If no one option above is applicable, please indicate the attendance pattern here (or on a separate sheet and attach to the supplementary information form). Also indicate if the church does not offer a weekly service.**

<b>Signed</b>	
<i>We do not accept 'pp' signatures</i>	
<b>Full name</b> <i>(block capitals please)</i>	
<b>Position held</b>	
<b>Name of Church</b>	
<b>Telephone number</b>	
<b>E-mail address</b>	
<b>Date</b>	

<b>CHURCH STAMP</b> <b>NB: also stamp Page 6</b>  (if no stamp is available, please confirm this on a signed letterhead)	
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<b>CHILD'S NAME</b>	
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<b>Criterion D2</b>	<b>Other World Faiths – Muslim</b>
<b>D3-</b>	<b>Other World Faiths</b>

**TO BE COMPLETED BY THE PARENT / CARER**

<b>Name of Religion</b>	<input type="checkbox"/> Buddhism <input type="checkbox"/> Hinduism <input type="checkbox"/> Islam <input type="checkbox"/> Jehovah's Witness <input type="checkbox"/> Judaism	<input type="checkbox"/> Mormonism <input type="checkbox"/> Sikhism <input type="checkbox"/> Unitarianism
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<b>Name, address and postcode of the place of worship</b>	
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<b>Is the child a regular worshipper in his/her faith community?</b>  In the event that during the period specified for attendance at worship the church or, in relation to those of other faiths, relevant place of worship 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, in relation to those of other faiths, relevant place of worship or alternative premises have been available for public worship.	Please tick  YES <input type="checkbox"/> NO <input type="checkbox"/>
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**TO BE COMPLETED BY THE LEADER OF THE WORLD FAITH COMMUNITY**

<b>Signed</b>	
<b>Full name (block capitals please)</b>	
<b>Position held</b>	
<b>Name of Place of Worship</b>	
<b>Telephone number</b>	



<b>CHILD'S NAME</b>	
<b>Date</b>	
<b>PLACE OF WORSHIP STAMP</b>  (if no stamp is available, please confirm this on a signed letterhead)	

## FOR COMPLETION FOR ALL CRITERIA

### DECLARATION BY PARENT/CARER

If after submitting this supplementary information form, any of the information given for admission, or religious enquiry form or any other form, letter or document associated with the application changes, then the Headteacher must be informed immediately. The Schools Admission Code allows admission authorities to withdraw the offer of a place if parents have given fraudulent or deliberately misleading information.

The Governing Body reserves the right to make enquiries regarding an applicant's religious practice and to seek verification of any information given on the admission form, religious enquiry form, letter or document associated with the application.

I confirm that the information on Page 1 is correct.

**Please note:** signing this section confirms that you have checked and agree with the accuracy of the information provided for each place of worship. **The Governing Body reserves the right to withdraw any offer made on the basis of false or inaccurate information.**

<b>Signed</b>	
<b>Print Name</b>	
<b>Title <i>please circle</i></b>	Mr   Mrs   Miss   Ms   Dr   Rev   Other .....
<b>Relationship to Child</b>	
<b>Date</b>	

**Please note you should submit this supplementary information form to St Hilda's AND ALSO:**

- **Make a formal application via your current school if transferring from one Liverpool school to another Liverpool school**
- **or via Liverpool Council's website if new to the city or transferring from another local authority school**

**<https://liverpool.gov.uk/schools-and-learning/school-admissions/in-yeartransfers/>**

**Please return this form to:**

**The Admissions Clerk, St Hilda's CE High School,  
Croxteth Drive, Sefton Park, Liverpool L17 3AL**