

**CONFIDENTIAL REFERENCE**  
**from a minister/a leader of a worshipping community**

**ST. ANDREW'S C.E. PRIMARY SCHOOL, HOVE**  
'Learning together, praying together'

**TO BE COMPLETED BY THE PARENT or CARER:**

Name of Parent(s) or Carer(s): \_\_\_\_\_

Name of Child: \_\_\_\_\_ D.O.B: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

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**TO BE COMPLETED BY THE MINISTER / THE LEADER OF THE WORSHIPPING COMMUNITY**

1. The parent(s)/carer(s) of the above child are known to me as a member of my faith community YES / NO
2. The parent(s)/carer(s) of the above named child are regular worshippers at my church / place of worship YES / NO

*(Regular is defined as at least twice a month for a minimum period of at least two years immediately prior to applying to St Andrew's.)*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Church /Place of Worship: \_\_\_\_\_

Contact telephone number: \_\_\_\_\_

Email address: \_\_\_\_\_

**Please use the reverse of this form for any additional information you may wish to give.**

Please return this form in an envelope marked '**STRICTLY CONFIDENTIAL**' to

The Headteacher  
St Andrew's CE Primary School  
Belfast Street  
Hove, BN3 3YT