

Hardwicke Parochial Primary Academy
Poplar Way, Hardwicke, Gloucester. GL2 4QG
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Additional information required by the school for the allocation of school places

In addition to the standard information required by the local authority, please could you complete this form so that places can be allocated according to the school's admission criteria.

Please answer all questions.

1. Are you requesting a place for a child in care (looked after child)? YES/ NO
(Please delete as appropriate)
2. Do you have active connections* with a church? (see below) YES/ NO
(Please delete as appropriate)
If so, state the church and denomination: _____
3. Are there any medical reasons** why your child should attend this school? YES/ NO
(Please delete as appropriate)

* Active connections mean being on the electoral or membership roll of the church. In order to qualify this, this form must be signed by your church minister below.

** If you have answered "Yes" to this question your application for a place must be supported by a written statement from a doctor.

Signed: _____

Name: _____

Child's Name: _____

Address: _____

Signature of Church Minister: _____

On behalf of (church): _____

This form should be completed and returned directly to the school. Thank you

Love your neighbour as yourself.
We care, learn and achieve... together.

