

APPLICATION FOR ADMISSION (Supplementary Form)

Please note that this form is in addition to the KCC In Year Application Form
The Kent County Council IYCAF must be completed in order for your application to be
considered by the Governors.

Hartlip Endowed Church of England (Aided) Primary School
The Street, Hartlip, Sittingbourne, Kent ME9 7TL
Tel: 01795 842473 Fax: 01795 843148
e-mail: headteacher@hartlip.kent.sch.uk
website: www.hartlip.kent.sch.uk



Child's name in full *Male/Female	
Parents'/Carers' names in full	
Address Telephone No:	
Child's Date of Birth	
Church Attended by Parents/Carers and Child	
Name of Rector/Vicar/ Minister who knows child	
Address of Rector/Vicar/ Minister	
Name and Address of previous Rector/Vicar/ Minister if you have moved recently.	
Names of brothers/sisters or other close members of the family who will be attending Hartlip School at the time of Admission.	
I/We apply for the admission of (Child's name) _____ to Hartlip Endowed Church of England (Aided) Primary School	
Date _____	Signature Parent/Carer _____

Should the Admissions Committee decide not to accept a child, parents may apply to the Headteacher, in writing, for details of the appeals procedure.

RECTOR/VICAR/MINISTER FORM

Section 1 to be completed by applicant as far as possible and then Section 2 to be signed by Rector/Vicar/Minister.

Section 1

Name of Child _____

Names of Parent(s)/Carers(s) _____

Address _____

Name of Church Attended: _____

Since When Attended (Date): _____

Service(s) Attended: _____

Frequency of Attendance * Monthly/*less than Monthly (*delete as appropriate)

If less than monthly - how often? _____

NB: Published Sunday congregational worship

Other Church Activities Attended: _____

How Often: _____

Section 2

Verification and Signature of Rector/Vicar/Minister (delete as appropriate)

- I confirm the above details and that they are members of my congregation according to the definition of the Admission Policy.
- Neither the above nor his/her parents, are to the best of my knowledge, members of my congregation.

Please note Under the terms of the Appeals Procedure parents wishing to appeal have the right to see all correspondence relating to their application.

Date _____

Signature _____
Rector/Vicar/Minister

Print Name: _____

Name of Church _____

Please return to:

The Headteacher
Hartlip Endowed Church of England (Aided) Primary School
The Street
Hartlip SITTINGBOURNE
Kent ME9 7TL

by (date):.....