



HARTFORD CHURCH OF ENGLAND HIGH SCHOOL

Supplementary Information Form

Name of child:

Surname	Christian Names
Date of birth	Boy <input type="checkbox"/> Girl <input type="checkbox"/>

Name of parent/guardian

Address

Post code

Telephone

Mobile

Place of worship one of parents / guardians regularly attends:

Name of place of worship

Address

Name of vicar / priest / minister / faith leader / church officer

Address

Post code

Telephone

Worship attendance or supporting evidence:

Please tick if you have attended a minimum of one service per month for at least six months prior to the closing date for applications as in criteria

Signed as confirmation (by incumbent, other church officer or other professional):

Name:

Position: