



St John's Primary School

Supplementary Information Form

To be completed for applications under criterion number 3 (Children of Staff)

Child's Details

Surname: _____

Forenames: _____

Date of Birth: _____

Name of Member of Staff: _____

Address: _____

Contact Details: Home _____ Mobile _____

E-mail _____

I am a member of staff and wish to enrol my child in accordance with the school's admissions policy.

I have been working at the school for at least two years.

Start Date _____

Position _____

Signature of Parent/Carer _____ Date _____