



# VA SUPPLEMENTARY INFORMATION FORM

## Admissions 2021 - 2022

*To be completed for all students seeking admission under categories 2 - 5 to St Edward's joint Roman Catholic / Church of England Voluntary Aided Comprehensive School, Poole and must be read in conjunction with the 2021 - 22 Admissions Policy.*

The information given on this form is intended to help the governors apply the school's Admissions Policy. It is important that the information given be objective and transparent. If applying under Category 2 - 5 you should complete it together with your priest/minister/faith leader. It is your responsibility to ensure that the form is completed correctly. Mistakes cannot be rectified once the form has been submitted.

The **Common Application** and the **St Edward's VA Supplementary Information** Forms will be held by the Local Authority (LA). The LA will then forward the **St Edward's VA Supplementary Information Form** to the governors' admission panel.

The St Edward's VA Supplementary Information Form is available online at [www.boroughofpoole.com](http://www.boroughofpoole.com) [www.st-edwards.poole.sch.uk](http://www.st-edwards.poole.sch.uk) or direct from St Edward's School.

It is the parents'/carers' responsibility to return the **St Edward's VA Supplementary Information Form** and the Common Application Form by the closing date and time. Both forms should be returned together direct to the admissions team at your Local Authority. (Poole LA will then send the relevant information on to St Edward's). **Both forms must be received by 31 October 2020. If an online application is made, the VA supplementary evidence form must be returned to the Local Authority by 31 October 2020.**

For applications for children moving into the locality, information needs to be provided by the priest/ minister/faith leader of their previous church/faith community endorsed by their accepting local church/faith community.

If your child is 'looked after' or 'previously looked after' this will be notified to the governors by the Local Authority. Please note that all children in care have priority in Category 1.

St Edward's School complies with the General Data Protection Regulations (GDPR) Act 2018. The information you supply is being collected for the purpose of providing an education service, but may be used for wider purposes and will be retained with your child's education record. When you submit this document you are consenting to that use. The information may be shared with the Borough of Poole, those with parental responsibility, education establishments, other local authorities, the Department for Education, diocesan bodies, other service providers to enable them to fulfil their statutory duties and any appeal panel that is convened with respect to your application.

# VA SUPPLEMENTARY INFORMATION FORM

This information should be the same as on the common application form. **(PLEASE PRINT)**

Name of child ..... D.O.B. \_\_/\_\_/\_\_\_\_

Name of parent/carers.....

Address .....

**Please complete ONE of the following sections:**

## Category 2 Roman Catholic applicants (not more than 75%):

I confirm that ..... (name of child) was baptised at  
..... (name of church and town) on \_\_/\_\_/\_\_\_\_ (date) **AND** has

**also either**

**(a)** made his/her first holy communion at ..... (name of  
church and town) on \_\_/\_\_/\_\_\_\_ (date) **OR**

**(b)** has attended services at ..... (name of church/es and town/s)  
at least monthly for the last **twelve** months.

Name of parent/carer ..... Signature ..... Date \_\_/\_\_/\_\_\_\_

*I confirm the information given in this section.*

Name of current Parish Priest: .....

Signature of parish priest(s): ..... Date \_\_/\_\_/\_\_\_\_

Name of previous parish priest (if applicable): .....

Signature of parish priest(s): ..... Date \_\_/\_\_/\_\_\_\_

## Category 3 Church of England applicants (not less than 25%):

I confirm that ..... (name of child) was baptised / has had a service of  
thanksgiving (delete as applicable) at ..... (name of church  
and town) on \_\_/\_\_/\_\_\_\_ (date) **AND** has attended services at .....  
(name of church/es and town/s) at least monthly for the last **twelve** months.

Name of parent/carer ..... Signature ..... Date \_\_/\_\_/\_\_\_\_

*I confirm the information given in this section.*

Name of current Parish Priest: .....

Signature of current parish priest: ..... Date \_\_/\_\_/\_\_\_\_

Name of previous parish priest (if applicable): .....

Signature of parish priest(s): ..... Date \_\_/\_\_/\_\_\_\_

**Category 4 Applicants** from churches which are a member churches of *Churches Together in Britain and Ireland* as stated on the CTBI website [ctbi.org.uk/member-churches](http://ctbi.org.uk/member-churches) (including Baptist Union, Methodist, listed orthodox, listed Pentecostal and United Reformed churches, the Salvation Army and members of the Religious Society of Friends)

I confirm that ..... (name of child) was baptised / has met my church's criteria for membership/practice (**delete as applicable**)  
at ..... (name and town) on \_/ \_/ \_ \_ \_ \_ (date)  
by ..... (please state how) **AND** has attended services at ..... (name of church/es and town/s) at least monthly for the last **twelve** months.

Name of parent/carer ..... Signature ..... date \_/ \_/ \_ \_ \_ \_

I confirm the information given in this section.

Name of current priest/minister/church leader: .....

Denominational Affiliation if applicable .....

Signature of current priest/minister/church leader: ..... Date \_/ \_/ \_ \_ \_ \_

Name of previous priest/minister/faith leader (if applicable): .....

Signature of previous priest/minister/church leader(s): ..... Date \_/ \_/ \_ \_ \_ \_

**Category 5 Applicants from other Christian Churches or Faith Communities:**

I confirm that ..... (name of child) was baptised/has met my church or faith community's criteria for membership/practice at .....(name of church or faith community and town) on \_/ \_/ \_ \_ \_ \_ (date) by ..... (please state how) **AND** has attended services at ..... (name of church/es or faith group meeting place/s and town/s) at least monthly for the last twelve months.

Name of parent/carer ..... Signature ..... date \_/ \_/ \_ \_ \_ \_

*I confirm the information given in this section.*

*Name of current priest/minister/faith leader: .....*

*Denominational Affiliation if applicable .....*

*Signature of current priest/minister/faith leader: ..... Date \_/ \_/ \_ \_ \_ \_*

*Name of previous priest/minister/faith leader (if applicable): .....*

*Signature of priest/minister/faith Leader(s): ..... Date \_/ \_/ \_ \_ \_ \_*