



**TWYFORD CHURCH OF ENGLAND HIGH SCHOOL**  
**Twyford Crescent, Acton, London W3 9PP**  
**Telephone Number: 0208 752 0141**

Application group	Points Total
<b>W</b>	

**FOR OFFICE USE**

**SUPPLEMENTARY INFORMATION FORM (RELIGIOUS REFERENCE) FOR A  
 WORLD FAITH PLACE**  
**To be used by members of World Faiths applying for ONE OF THE 21  
 PLACES AVAILABLE FOR YEAR 7 in September 2020**

**PLEASE NOTE** Twyford receives in excess of 600 applications each year and there is a waiting list for ALL YEAR GROUPS

The completed form should be sent by the parent/ carer(s) to the Governors' Admission Panel, Twyford Church of England High School, Twyford Crescent, Acton, London W3 9PP **by 4:00 PM ON FRIDAY 25<sup>th</sup> OCTOBER 2019.**

Date received: .....

1. **THIS FORM SHOULD BE RETURNED TO TWYFORD (AT THE ADDRESS ABOVE) BY 4:00 PM ON FRIDAY 25 OCTOBER 2019. Failure to complete a supplementary information form may affect the priority afforded to the application.**
2. **YOU MUST ALSO RETURN THE COMMON APPLICATION FORM TO YOUR LOCAL BOROUGH BY THURSDAY 31 OCTOBER 2019 unless otherwise advised.**

This form is for the use of the Governors' Admission Panel so that they may consider this application fully. The information given, together with any supporting evidence submitted before the closing date above, is the Governors' only source of information. Applicants on behalf of a Looked After or Previously Looked After child need only complete page 1 of this form. All other applicants **need to complete BOTH sections A and B of the form accurately and with full details.** The form, together with all supporting evidence, is made available to the Appeals Panel in the case of any Appeal against non-admission. In all other aspects, information is treated in confidence. **Please complete the form for the type of place for which you are applying: - PEACH form for a Foundation or Christian place; YELLOW form for a World Faith place.**

If you have difficulty in completing any part of the form, please telephone the School and talk to the Admissions Officer.

**LEGAL SURNAME OF CHILD:** .....

**FORENAMES:** .....

**DATE OF BIRTH:** .....

**HOME ADDRESS:** .....

.....

..... **Post code:** .....

**Full Name of any sibling (brother/sister already at Twyford who will still be at Twyford next academic year)**  
 .....

**Parent or carer details: (THIS IS WHO LETTERS FROM TWYFORD WILL BE ADDRESSED TO)**

**Surname:** ..... **Email address:** .....

**Forename:** .....

**Mr/Mrs/Miss/Ms** ..... **Alternative contact:**

**Relationship to child:** ..... **Name:** .....

**Home Telephone:** ..... **Telephone number:** .....

**Mobile Telephone:** .....

I wish my child to be admitted to Twyford C of E High School and confirm that the information submitted on this form is correct.  
 Signature of Parent or Carer .....

**If you post your application and wish to receive acknowledgement that the school has received it please enclose an s.a.e. If you bring your application to the school please ensure you receive a receipt**

**PART A.**

**Religious Reference.**

This part is to be completed by **the Religious Leader**, in the presence of the applicant. We suggest that the details are discussed and agreed with the parents before submission to the Governors. Religious leaders may wish to retain a copy for their own records should further enquiries prove necessary. Your attention is drawn to the admission criteria which have already been given to the applicant and which are available on the school website (www.twyford.ealing.sch.uk).

**Please note this form cannot be completed by teachers of Saturday Schools.**

**[ Please tick the correct box ]**

1. Child's Gurdwara/Temple/Mosque/Synagogue attendance over the last 5 years.  
**Please tick the appropriate box that describes the child's attendance.**  
**(max 5 points)**

Weekly	
3 times a Month	
Fortnightly	
Monthly	
Occasionally	

2. Parent's Gurdwara/Temple/Mosque/Synagogue attendance over the last 5 years.  
**Please tick the appropriate box that describes the parents' attendance.**  
**(max 5 points)**

Weekly	
3 times a Month	
Fortnightly	
Monthly	
Occasionally	

3. For how many years over the last 5 years has the child attended the Gurdwara/Temple/Mosque/Synagogue services?  
**(max 5 points)**

One year	
Two years	
Three years	
Four years	
Five years	

4. For how many years over the last 5 years have the Parents attended the Gurdwara/Temple/Mosque/Synagogue?  
**(max 5 points)**

One year	
Two years	
Three years	
Four years	
Five years	

For SCHOOL Use only

Name of Place of Worship.....

Address: .....

.....

..... Postcode .....

Telephone Number: .....

**OFFICIAL STAMP OF PLACE OF WORSHIP:**



Signed: .....  
**Religious leader** **Name (in block capitals please)**

**PART B**

**TO BE SIGNED BY PARENT:**

**During the last 5 years:**

**If you attend more than one Gurdwara/Temple/Mosque/Synagogue or if you have recently moved or changed Gurdwara /Temple/Mosque/Synagogue, please arrange for a reference from the religious leader of the other place of worship to be included with this application.**

**I confirm that the information in Part A is correct.**

Signed: ..... **Parent / Carer** .....

Date:.....

**Note to the Religious Leader:**

**Please put your full signature next to any alterations.**