 **Application for Admission to St Paul’s Church in Wales Primary School**

**The school is open to any child of primary school age whose parents wish them to receive a Christian education according to the teachings of the Church in Wales.**

**All applications are assessed by the Admissions Committee of St Paul’s Church in Wales Primary Schools Governing Body. If there are more applications than places available, selections will be made according to the school admissions criteria found on the enclosed admissions policy.**

**Please note that for some criteria, evidence is required at the time of application and that all faith references will be verified. Please ensure your faith leader is happy to act as a reference for you and your family, and ensure we have their correct contact details.**

**Please refer to the school admissions criteria attached for clarification relating to each of the criteria.**

***In order to be considered, this form must be returned directly to the school by post, email or by hand***

**Personal details of your child: (please circle/delete where a choice is given)**

Child’s full name: ……………………………….……………………………………………………………….…

Date of Birth…….............................................. Child’s sex: Male / Female

Child’s home address: …………………………………………………………………….………………...

………………………………………………………………………………..Post Code:……………………….

Parent/’s name/s:……………………………………………………………………………………….……..

Parent/’s address (if different to above):……………………………………….……….…………….

Tel. Number:…………......................... Email Address………….………………………………..

**Criteria for Admission**

**Category 1** – Looked After Children

**Is your child a Looked After Child/Previously Looked After Child?** **Yes/No**

**Category 2** – Children with A Statement of Special Educational Needs

**Does your child hold a statement of Special Educational Needs? Yes/No**

**Category 3** – Practising Members of the Parish Churches of Grangetown St Paul’s or St Dyffrig and St Samson.

**Are you or your child a practicing and committed member of the Parish Churches of Grangetown St Paul’s or St Dyffrig and St Samson? Yes/No**

* If **YES** please state which church and provide contact details for a reference. (Without a reference we will not be able to consider your child under this category.)

I/We attend………………………………………………………………………………………………………

Faith leader …………………………Contact number/email ……………………………….…………

**Category 4** – Practising Members of the Anglican Church who LIVE in the Parish.

**Do you live within the Parish of Grangetown St Paul or St Dyffrig and**

**St Samson and are you or your child regular practicing members of the Anglican Church in Wales? Yes/No**

* If **YES** please state which church and provide contact details for a reference. (Without a reference we will not be able to consider your child under this category.)

I/We attend ………………………………………………………………………………………………………

Faith leader ………………………… Contact number/email …………………………………………

**Category 5 –** Siblings

**Does your child have a full/half/step sibling who already attends St Paul’s Church in Wales Primary School living at your address? YES/NO**

Please give the names and date of birth of the child’s siblings who are already attending this school.

Name……………………………………………………………………………… DOB…………………………

Name……………………………………………………………………………… DOB…………………………

**Category 6 –** Practising Members of the Anglican Church who DO NOT LIVE in the Parish.

**Do you live outside the Parish of Grangetown St Paul or St Dyffrig and**

**St Samson and are you or your child regular practicing members of the Anglican Church in Wales? YES/NO**

* If **YES** please state which church and provide contact details for a reference. (Without a reference we will not be able to consider your child under this category.)

I/We attend ………………………………………………………………………………………………………

Faith leader …………………………Contact number/email …………………………………………

**Category 7 –** Practising Christians who LIVE within the Parish of Grangetown St Paul or St Dyffrig and St Samson.

**Do you live within the Parish of Grangetown St Paul or St Dyffrig and St Samson and are you a regular practicing member of another Christian denomination? YES/NO**

* If **YES** please state which church and provide contact details for a reference. (Without a reference we will not be able to consider your child under this category.)

I/We attend ………………………………………………………………………………………………………

Faith leader …………………………Contact number/email …………………………………………

**Category 8 –** Practising Members of Other Faiths who LIVE in the Parish of

Grangetown St Paul or St Dyffrig and St Samson.

**Do you live within the Parish of Grangetown St Paul or St Dyffrig and St Samson and are you or your child a regular practicing member of another major faith as defined by the Inter Faith Forum – Christianity, Judaism, Islam, Sikhism?****YES/NO**

* If **YES** please state which place of worship and provide contact details for a reference. (Without a reference we will not be able to consider your child under this category.)

I/We attend ……………………………………………………………………………………………………

Faith leader …………………………Contact number/email …………………………………………

**Category 9 –** Practising Christians who DO NOT LIVE in the Parish

**Do you live outside the Parish of Grangetown St Paul or St Dyffrig and**

**St Samson and are you a regular practicing member of another Christian denomination? YES/NO**

* If **YES** please state which church and provide contact details for a reference. (Without a reference we will not be able to consider your child under this category.)

I/We attend ……………………………………………………………………………………………………

Faith leader …………………………Contact number/email …………………………………………

**Category 10 –** Practising Members of Other Faiths who DO NOT LIVE in the Parish

**Do you live outside the Parish of Grangetown St Paul or St Dyffrig and St Samson and are you or your child a regular practicing member of another major faith as defined by the Inter Faith Forum – Christianity, Judaism, Islam, Sikhism?** **YES/NO**

If **YES** please state which place of worship and provide contact details for a reference. (Without a reference we will not be able to consider your child under this category.)

I/We attend ………………………………………………………………………………………………………

Faith leader …………………………Contact number/email …………………………………………

**Category 11** – Children who have been Baptised

**Has your child been baptised, dedicated or christened? YES/NO**

* **If YES,** Please supply date and place and a copy of the certificate

Date…………………… Place………………………………………………………………………………………

**Category 12 –** Other Reasons

**Do you wish your child be admitted to St Paul’s Church in Wales Primary School for any other reason? YES/NO**

Please state your reason for you wish for your child to be admitted under this category. (Attach a letter if you require additional space.)

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I understand that should this application be successful an offer of a place will be on the following condition:

That as a parent I will undertake to acknowledge the school’s ethos and values which will help to develop my child’s understanding of spiritual, moral, social and cultural issues to further their own beliefs, character and behaviour within the school’s Christian environment.

Current School where your child attends:………………………………………………………..

Name of Parent/Carer: ……………………………………………………………………………….……

Signed: …………………………………………………………………………… Date: ……………………

**For Office use only**

Date received at school……………………….Signature of receiver ..………………………………………

Faith reference verified YES/NO

Comments

………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Distance from school (if oversubscribed in category) ……………………………………miles

**Admissions Committee Decision**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1** | **2** | **3** | **4** | **5** | **6** |
|  |  |  |  |  |  |
| **7** | **8** | **9** | **10** | **11** | **12** |
|  |  |  |  |  |  |

Signatures of Admissions Committee members assessing this application.

Signature………………………………………………Date……………

Signature………………………………………………Date……………

Signature………………………………………………Date……………

Signature………………………………………………Date……………

Notes…………………………………………………………………………………………………………………………..