



Camden

Emmanuel Church of England Primary School

152-158 Mill Lane, West Hampstead, London, NW6 1TF

Tel: 020 7431 7984 Email:

admin@emmanuel.camden.sch.uk

<https://www.emmanuel.camden.sch.uk/>

NURSERY AND MAIN SCHOOL SUPPLEMENTARY FORM FOR ENTRY SCHOOL YEAR 2024 - 2025

This form is for the use of the Governors' Admission Panel so that they may consider this application fully. Admission to the School is granted by the School Governors according to the Emmanuel Church of England Primary School Main School Admissions Policy, which is available on request from the School. This 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.

Supplementary Form Requirements:

- Applicants on behalf of Route 1, Route 2 and Route B1 criteria, as defined in the Admissions Policy, need only complete and submit Section A of this form to the School before the application deadline.
- Applicants on behalf of all Route A criteria must complete and submit Section A of this form to the School before the application deadline, and arrange for the nominated Clergy member of their current and/or former Church to complete and submit Section B of this form to the School before the application deadline.
- Applicants on behalf of Route B2 criterion are not required to complete the Supplementary Form.

All applicants must complete the Pan London eAdmissions application via <https://www.eadmissions.org.uk/> prior to the application deadline, regardless of application route.

Please note that completion of this form does not guarantee a place at the School and this application will be void if false information is given. We may ask for further evidence to support your application. This form should be returned to the School **from 01 September 2023 and before the deadline of 15th January 2024.**

If you are applying under the Route A criterion Section B of this form should be submitted directly to the Clergy member of your Church in good time so that applications can be cross-checked against the Church attendance register and forwarded to the School office. In the event of a Section A of a supplementary form being unsigned by the relevant priest/minister or insufficient evidence is given of church attendance, the application will automatically be considered under Route B.



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Section A Personal Details

Child's Details

First name	Known as
Family name	
DOB (dd/mm/yy)	Male / Female / Unspecified
Sibling's Name (where appropriate)	

Parent's / Carer's Details

Parent's / Carer's name(s)
Address (including Borough)
Post Code
Telephone No
Email Address

Is the parent of the child a current member of Emmanuel Church, West Hampstead or another Christian Church? (please refer to the definitions in our admissions policy)	Yes / No
Name of Church attended	
Has at least one parent of the above child regularly attended the church for a minimum of 6 services in each of the 8 successive quarters in the twenty four month period immediately preceding the date of application?	Yes / No

Please specify the admissions route criterion under which you are applying _____

I wish my child to be admitted to Emmanuel Church of England Primary School and confirm that the information submitted on this form is correct.

Signature of Parent or Carer _____

Once complete, please forward to Emmanuel Church of England Primary School, 152-158 Mill Lane, West Hampstead, London, NW6 1TF or email to admin@emmanuel.camden.sch.uk.



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Section B Religious Reference

This section is to be completed by the nominated Clergy member of your current and/or former Church. We suggest that the details are discussed and agreed with the parents and Clergy 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 in the Main School Admissions Policy.

Child's Details

First name	Known as
Family name	

Parent's / Carer's Details

Parent's / Carer's name(s)

Church Details

Place of worship		
Name and position of Clergy member completing this form		
Church affiliation (Circle One)	Churches Together in Britain and Ireland / Evangelical Alliance	
Address	Official Church stamp or seal	
Post Code		
Telephone No		
Email		

I confirm that the applicant regularly attends Church with at least one Parent, where regular attendance shall mean attendance for a minimum of six services in each of the eight successive quarters in the twenty-four-month (two-year) period immediately preceding the date of the application.

Signature of the clergy person in charge of your Church in support of this application	Date

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