

## Academic Excellence for each person in a Christian Community

# In-Year Application Form Year 7 - Year 11

When completing this form, please refer to the Archbishop Tenison's Admission Criteria on the school website relevant to the applicant's date of birth

Section 1 - Child's Details (Please complete in full and in CAPITAL LETT	TERS)
Surname	
First Name(s)	
Date of Birth// Gender	Male / Female* (*please delete as applicable)
Home Address	
P	ostcode
Does a brother or sister currently attend Archbishop Tenison's School?	Yes / No*
If Yes, please provide the name of sibling(s) and their current form(s).	
Current School (or last school attended)	
Address of current school	
Is the applicant on the SEN register at their current school? Yes $/$ No*	
Section 2 – Parent(s) / Carer(s) Details Parent /Carer (Mr/Mrs/Miss/Ms/Other)	
Relationship to Child	
Home Address	
	Postcode
Home Telephone No.	_
Daytime Telephone No	_
Email	_ (this may be required for any follow up enquiries)

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# Section 3 – Type of Application

#### Which type of Application do you wish to make?

Please refer to the Admission Criteria for the definition of differences in the types of application and tick the (one) box which applies to your application.

✓ Please tick ONE box only □ Looked After Child Place	
State which Local Authority	
If you have ticked this category please now	
<ul> <li>sign and date Section 4 below</li> </ul>	
Previously Looked After Child	
State which Local Authority	
If you have ticked this category please now	
sign and date Section 4 below	
Foundation Place	
If you have ticked this category please refer to the Admission Criteria	
<ul> <li>sign and date Section 4 below</li> </ul>	
and	
complete Section 5	
Open Place	
If you have ticked this category please now	
<ul> <li>sign and date Section 4 below</li> </ul>	
Governors' Place	
If you have ticked this category please refer to the Admission Criteria and	
provide additional information to support your application.	
If you have ticked this category please now	
<ul> <li>sign and date Section 4 below</li> </ul>	

Please state reason(s) for applying for an in-year school place:	
Section 4 – to be completed by ALL applicants	
Signature of Parent/Carer	Date

Please complete and send directly to the school: Archbishop Tenison's CE High School Selborne Road, Croydon, CRO 5JQ Email: admissions@archten.croydon.sch.uk www.archten.croydon. sch.uk DFE No.: 306/4600 You must also contact your Local Authority

Please note that <b>Fc</b> assessing this, you normally resident, With reference to t Church and 40% fo Confirmation of me	tion for a Foundation Place (continues bundation Places are offered purely on are asked to provide details of only ON and who is most actively involved in ch the Admission Criteria, 50% of available r members of other churches who are f embership of the applicant's family in C be requested to provide a reference.	church affilia E <b>named pa</b> urch life. e places will ull members	r <b>ent or carer*</b> , w be reserved for r s of the organisat	ith whom the child is nembers of the Anglican ions listed.
*Named parent/ca	arer on whom the church reference wil	l be sought_		
Church attended b Church Attended	by Parent / Carer		Church attended	d by Child (if different)
How many years ha Name of your current Priest, Minister or Pastor Minister Address	ave you attended this church?			
(to where reference should be sent)				
Postcode				
Telephone No.				
Email				
check with your N The Church of Eng The Evangelical Al Churches Togethe Affinity	-	dmission Cri Please tick D D D D D D	•	church belong? (Please Please tick ✓ □ □ □ □
Church	ed the above church for less than two Church attended by Parent / Carer		-	of your previous church. by Child (if different)
Attended How many years ha Name of Minister	ave you attended this church?			
Address (to where reference should be sent)				
Postcode Telephone No.				
Email				

Please indicate how often you attend church worship:			
	Please tick 🖌	Please tick 🖌	
	Parent/Carer	Child	
Weekly			
Fortnightly			
Monthly			
Less than monthly			
Seldom/never			

## Please give information about your involvement in the life of the church:

Referring to the **Admission Criteria**, please give details of any church activities in which you are involved, including posts of responsibility or church offices held. Since terms are used with widely different meanings in different churches, please indicate precisely what you do, how often and for long you have been involved in this.

#### Involvement of Parent/Carer:

Church activity	How often do you	How long have you
	do this?	been involved in this?
	Please tick ✓	Please tick ✓
	<ul> <li>weekly</li> <li>fortnightly</li> <li>monthly</li> <li>less than monthly</li> </ul>	<ul> <li>☐ for 2 or more years</li> <li>☐ for at least a year</li> <li>☐ for less than a year</li> </ul>
	<ul> <li>weekly</li> <li>fortnightly</li> <li>monthly</li> <li>less than monthly</li> </ul>	<ul> <li>☐ for 2 or more years</li> <li>☐ for at least a year</li> <li>☐ for less than a year</li> </ul>
	weekly fortnightly monthly less than monthly	<ul> <li>☐ for 2 or more years</li> <li>☐ for at least a year</li> <li>☐ for less than a year</li> </ul>
	<ul> <li>weekly</li> <li>fortnightly</li> <li>monthly</li> <li>less than monthly</li> </ul>	<ul> <li>☐ for 2 or more years</li> <li>☐ for at least a year</li> <li>☐ for less than a year</li> </ul>
	weekly fortnightly monthly less than monthly	<ul> <li>☐ for 2 or more years</li> <li>☐ for at least a year</li> <li>☐ for less than a year</li> </ul>

# Involvement of Child:

Church activity	How often do you do this? Please tick ✓	How long have you been involved in this? Please tick ✓
	<ul> <li>weekly</li> <li>fortnightly</li> <li>monthly</li> <li>less than monthly</li> </ul>	<ul> <li>☐ for 2 or more years</li> <li>☐ for at least a year</li> <li>☐ for less than a year</li> </ul>
	<ul> <li>weekly</li> <li>fortnightly</li> <li>monthly</li> <li>less than monthly</li> </ul>	<ul> <li>☐ for 2 or more years</li> <li>☐ for at least a year</li> <li>☐ for less than a year</li> </ul>