

**Long Ditton St Mary's  
Church of England (Aided) Junior School**  
Sugden Road, Long Ditton, Surrey, KT7 OAD

Tel: 020 8398 1070, Fax: 020 8398 3720, email: [school@stmarys-surbiton.surrey.sch.uk](mailto:school@stmarys-surbiton.surrey.sch.uk).

**CLERGY FORM**

*This form should only be completed if you are applying for a place at Long Ditton St Mary's Church of England (Aided) Junior School under Criteria 4.1, 4.2, 5.1,5.2, 5.3,6.1, 6.2, 6.3 (see Admission Criteria). It serves to obtain evidence of Christian commitment and practice for those seeking admission on the basis that they are of the faith of the School.*

***Both sides of this form should be filled in. ONCE YOU HAVE COMPLETED SECTION A and B YOU SHOULD PASS IT TO THE MINISTER/INCUMBENT/RELIGIOUS LEADER OF YOUR CHURCH TO COMPLETE SECTION C. The form should then be returned to Mrs C.S.Woods (Headteacher), Long Ditton St Mary's Church of England (Aided) Junior School, Sugden Road, Long Ditton, Surrey, KT7 OAD together with the Admission Form.***

I/we as parents/guardians of the child named below have applied for a place at Long Ditton St Mary's Church of England (Aided) Junior School and wish to have a place allocated because of our religious affiliation.

**Section A** (to be completed by the parent/guardian with parental responsibility for the child)

SURNAME OF CHILD: \_\_\_\_\_

CHILD'S FIRST NAME/OTHER NAMES: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

NAME OF PARENT(S)/GUARDIAN(S) WITH PARENTAL RESPONSIBILITY:

\_\_\_\_\_

HOME ADDRESS: (ie where the child normally lives)\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Post code \_\_\_\_\_

Tel No. \_\_\_\_\_

Continued overleaf

**Section B**

NAME AND ADDRESS OF CHURCH: \_\_\_\_\_

\_\_\_\_\_

TEL NO: \_\_\_\_\_

Please identify your family/child as being over the past two years:

*(Please tick and comment as appropriate)*

Known to the church

\_\_\_\_\_

\_\_\_\_\_

Attached to the church,

\_\_\_\_\_

\_\_\_\_\_

At the heart of the church,

\_\_\_\_\_

\_\_\_\_\_

If you are new to the area please provide evidence from a previous church or churches.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**Section C** This section should be signed by the Minister/Incumbent/Religious Leader or appropriate Senior member of the Church

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

Minister/Incumbent/Religious Leader or appropriate Senior member of the Church of  
\_\_\_\_\_ Church

Address: \_\_\_\_\_

\_\_\_\_\_

Tel Number \_\_\_\_\_

