

# Application Form 2015/2016

*Burdett-Coutts & Townshend Foundation  
CE Primary School*

Burdett-Coutts & Townshend Foundation CE VA Primary School is a Church of England Primary School. We have children of many different faiths, and of none. Please note that our pupils attend church each week.

Completing this application form for entry into Nursery does not guarantee your child a place in the Reception Class.

Please circle:                  Nursery                  Reception                  In-year Admission

Please complete one form for each child

<b>Family Name:</b>	<b>First Name/s:</b>
<b>Date of Birth:</b>	<b>Boy/Girl – please circle one</b>
<b>Address:</b>	<b>Contact Numbers:</b> Please supply all the numbers you would prefer us to contact you on
<b>Name of Parent(s) and/or carer(s):</b>	
<b>Does your child attend a Nursery of Playgroup?</b> Yes/No	<b>Does your child have any brothers of sisters?</b> Yes/No
<b>If Yes, please state which one:</b>	<b>What are their names and ages?</b>



# Church Reference Form

*Burdett-Coutts & Townshend Foundation  
CE Primary School*

**Dear Parent/Carer,**

**Please ensure that you have filled in Section 1 before asking your Minister/Priest to complete this form.**

**Section 1:**

**Surname of child:**

**Other names:**

**Date of birth:**

**Name of parent(s)/carer(s):**

**Address:**

**Post Code:**

**Dear Minister/Priest:**

**The parent(s)/carer(s) of the child named above have applied for a place at Burdett-Coutts & Townshend Foundation CE VA Primary School and has given your name as a reference. We would be grateful if you could kindly complete and return this form directly to the following address: *Admissions, Burdett-Coutts & Townshend Foundation CE VA Primary School, Rochester Street, London SW1P 2QQ.***

**Thank you for your kind assistance.**

**Section 2:**

**Name and address of place of worship:**

**Is your church Anglican? Yes/No**

**If no, is your church either a full or associate member of the Churches Together in Britain and Ireland or the Evangelical Alliance?**

**Full member/associate member**

**How long has the family worshipped at your church?**

< 6 months  6 months – 1 year  1 -2 years  > 2 years

**How frequently do they attend church worship?**

Weekly  Fortnightly  Monthly  Occasionally

Other  Kindly give brief details below:

**Signature of Minister/Priest:**

**Date:**

**Name:**

**Contact Address:**

**Phone Number:**