

## THE HOLY TRINITY CHURCH OF ENGLAND SECONDARY SCHOOL

Buckswood Drive, Gossops Green, Crawley, RH11 8JE., tel. 01293 423690

## SUPPLEMENTARY INFORMATION FORM (SIF) FOR ADMISSION TO YEAR 7 SEPTEMBER 2025

If the school is oversubscribed, an application for a place in criteria 2, 3, 6, 7, 8, 9 or 10 without a supporting reference is less likely to succeed. School expectations are outlined in the School Prospectus. The completed SIF, together with relevant documentation, should be returned to the Admissions Officer by 31st October 2024.

Before completing this form it is important that you have read and understood fully the admission arrangements and oversubscription criteria attached.

| PLEASE WRITE IN BLOCK CAPITALS  |             |            |
|---|-------------|------------|
| COMPLETE THIS SECTION IN ALL CASES  |             |            |
| Pupils Legal Surname Date of Birth  |             |            |
| Full Forenames  | Male        | Female     |
| Address   |             |            |
| Post Code Telephone Number  |             |            |
| Details of full, half, step, foster or adoptive siblings <b>living at the same address</b> as the applicate be in the <b>SIXTH Form</b> at the proposed date of entry:  | int above   | who will   |
| Name of Sibling Current Tutor G   | roup        |            |
| Please note that names of siblings in years 7-11 are captured on the Local Authority's on   | ıline appli | cation     |
| COMPLETE THIS SECTION IF APPLYING IN CRITERIA 2, 3, 6 or 7 (PINK REFER  | ENCE)       |            |
| Do the parents attend a place of Christian worship at least fortnightly?  | NO          | YES        |
| Do the parents attend a place of Christian worship less than fortnightly but at least monthly?  | NO          | YES        |
| If you have answered 'YES' to any of the questions in this section a PINK reference must be<br>Minister, Priest or Leader of the Church where the parents worship.  | e complet   | ed by the  |
| COMPLETE THIS SECTION IF APPLYING IN CRITERIA 4   |             |            |
| Name of CofE School currently attended:   |             |            |
| COMPLETE THIS SECTION IF APPLYING IN CRITERIA 5 (Staff)   |             |            |
| Are you currently a member of staff at Holy Trinity CofE Secondary School, or are you being considered for a position at the school?  | NO          | YES        |
| COMPLETE THIS SECTION IF APPLYING IN CRITERIA 8 OR 9 (BLUE REFEREN  | CE)         |            |
| Do the parents attend a place of worship at least fortnightly?  | NO          | YES        |
| Do the parents attend a place of worship less than fortnightly but at least monthly?  | NO          | YES        |
| If you have answered 'YES' to any of the questions in this section a BLUE reference <u>must</u> be<br>Minister, Priest or Leader of the place where the parents worship.  | e complei   | ted by the |
| COMPLETE THIS SECTION IF APPLYING IN CRITERIA 10 (ORANGE REFEREI  | NCE)        |            |
| Has the child played basketball for the last year?<br>If you answer "YES", please ensure the Orange reference is completed by the Team coach  | NO          | YES        |
| <ul> <li>I confirm that I have legal parental responsibility for this child and their education.</li> <li>I have read the admission arrangements and oversubscription criteria attached.</li> <li>The information I have given is correct to the best of my knowledge.</li> </ul> |             |            |
| Full Name   |             |            |
| Signature   |             |            |