



# 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 2026

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 2025.

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

<b>COMPLETE THIS SECTION IN ALL CASES</b>	
Pupils Legal Surname _____	Date of Birth _____
Full Forenames _____	Male <input type="checkbox"/> Female <input type="checkbox"/>
Address _____	
Post Code _____	Telephone Number _____
Details of full, half, step, foster or adoptive siblings <b>living at the same address</b> as the applicant above who will be in the <b>SIXTH Form</b> at the proposed date of entry:	
Name of Sibling _____	Current Tutor Group _____
Please note that names of siblings in years 7-11 are captured on the Local Authority's online application	
<b>COMPLETE THIS SECTION IF APPLYING IN CRITERIA 2, 3, 6 or 7 (PINK REFERENCE)</b>	
Do the parents attend a place of Christian worship at least fortnightly?	NO <input type="checkbox"/> YES <input type="checkbox"/>
Do the parents attend a place of Christian worship less than fortnightly but at least monthly?	NO <input type="checkbox"/> YES <input type="checkbox"/>
<i>If you have answered 'YES' to any of the questions in this section a PINK reference must be completed by the Minister, Priest or Leader of the Church where the parents worship.</i>	
<b>COMPLETE THIS SECTION IF APPLYING IN CRITERIA 4</b>	
Name of CofE School currently attended: _____	
<b>COMPLETE THIS SECTION IF APPLYING IN CRITERIA 5 (Staff)</b>	
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 <input type="checkbox"/> YES <input type="checkbox"/>
<b>COMPLETE THIS SECTION IF APPLYING IN CRITERIA 8 OR 9 (BLUE REFERENCE)</b>	
Do the parents attend a place of worship at least fortnightly?	NO <input type="checkbox"/> YES <input type="checkbox"/>
Do the parents attend a place of worship less than fortnightly but at least monthly?	NO <input type="checkbox"/> YES <input type="checkbox"/>
<i>If you have answered 'YES' to any of the questions in this section a BLUE reference <u>must</u> be completed by the Minister, Priest or Leader of the place where the parents worship.</i>	
<b>COMPLETE THIS SECTION IF APPLYING IN CRITERIA 10 (ORANGE REFERENCE)</b>	
Has the child played basketball for the last year?	NO <input type="checkbox"/> YES <input type="checkbox"/>
<i>If you answer "YES", please ensure the Orange reference is completed by the Team coach</i>	
<ul style="list-style-type: none"><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 _____	