





Abbey Grange Church of England Academy

Butcher Hill, Leeds, LS16 5EA 0113 275 7877

Supplementary Information Form (SIF) for entry to the academy in September 2026 Closing date for receipt is 31 October 2025

Child's Legal Surname:

Child's Legal Forename(s):

Date of Birth:

Parent/Carer Name:

Address:

Postcode:

Tel/Mobile No:

You should read and complete this form in conjunction with our admissions policy for 2026.

Failure to correctly complete this form may affect your application as governors will not be able to rank your application against the faith oversubscription criteria.

All applicants should fill in sections 1 to 3 as fully as possible and should sign and date the reverse

Please Note:

Parent/Carer Email Address:

In the event that during the period specified for attendance at worship the church [or, in relation to those of other faiths, relevant place of worship] has been closed for public worship and has not provided alternative premises for that worship, the requirements of these [admissions] arrangements in relation to attendance will only apply to the period when the church [or in relation to those of other faiths, relevant place of worship] or alternative premises have been available for public worship.

Appendix 2: Supplementary Information Form (SIF)

| 1. | Attendance of immediate family ¹ members at worship: please tick the box which you think best describes your situation. | | | | | | |
|--|--|------------------|----------|------------------|-------|---|-----------------|
| | At the heart of the Church/Place of Worship This means someone whose family worships twice a month or more. The worshipper might be the child or one or more parents/carers. | | | | | | |
| | Attached to the Church/Place of Worship This means someone whose family worships at least once every 2 months. The worshipper might be the child or one or more parents/carers. | | | | | | |
| | 1'Immediate family' is defined as one or more parents or carers or the child. | | | | | | |
| | For how long? | More than 1 year | | | | | |
| | | | Less tha | an 1 year: | | less than 1 year, pleas your previous church | |
| 2. | Please indicate which Church or Place of Worship you usually attend. | | | | | | |
| | Your Religious Denomination: | | | | | | |
| | Your Church/Place of Worship's Name: | | | | | | |
| | Address: | | | | | | |
| 3. | Please give the name and contact details of your Vicar/Minister/Faith Leader to whom we can contact to request information about your Church/Place of Worship attendance. Please provide a church/place of worship email address where possible (email addresses that are not published on the Church/Place of Worship website or do not contain the Church/Place of Worship name will not be accepted). We recommend that you contact your Faith Leader before returning this form; please note that he/she will be sent a separate form. | | | | | | |
| | Name of Vicar/Minister/Faith leader: | | | | | | |
| | Church Email Address: | | | | | | |
| | Address: | | | | | | |
| | Tel/Mobile No: | | | | | | |
| Please si | gn below to give perm | nission | to share | your details wit | th th | ne faith leader you hav | ve named above. |
| Parent/Ca | arer Signed: | | | | | Date: | |
| Please | return this form to: Ac | | | | | | |
| LS16 5EA or sif@abbeygrangeacademy.co.uk Closing date for receipt is 31 October 2025 PRIVACY NOTICE: For information on how we collect, store and use personal data you provide, please refer to our privacy notices available on our website at www.abbeygrangeacademy.co.uk or on request | | | | | | | |
| from the academy office | | | | | | | |