



# The Winston Churchill School

## Supplementary Information Form

(Admission Criteria 4, 5 and 6 only)

Please complete and return this form to The Winston Churchill School for the attention of Mrs W Arthur or email to [w.arthur@wcsc.org.uk](mailto:w.arthur@wcsc.org.uk) .

**I wish to apply for a place at The Winston Churchill School for my child as indicated below:**

Please tick

Academic ability	
Music ability	
Both Academic and Music ability	
Eligible for Service Children in Education Premium	
Child of staff employed at the school	
Name of staff member:	
Length of service:	

### Information about your child

Surname:	Forename(s):		
Date of Birth:	Male <input type="checkbox"/>	Female <input type="checkbox"/>	
Child's Permanent Home Address:			
			Postcode: _____
Parent/Carer Full Name:			
Parent/Carer Email Address:			
Parent/Carer <b>daytime contact</b> telephone numbers (for emergency use):			

**Children will be invited to attend the academic and music tests**

The school reserves the right to verify the information given on this form. Any offer of a place based on fraudulent information will be withdrawn.

Signed (Parent/Carer): \_\_\_\_\_ Date: \_\_\_\_\_