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 Armstrong or email to l.armstrong@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 ☐	Female ☐
Child's Permanent Home Address: Postcode: _____		
Parent/Carer Full Name:		
Parent/Carer Email Address:		
Parent/Carer **daytime contact** 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 Any offer of a place based on fraudulent information will be withdrawn.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: _____