

## **The Winston Churchill School**

## **Supplementary Information Form**

(For applications under Admission Criteria 4, 5 or 6 only)

Please complete and return this form to The Winston Churchill School via email to: <a href="mailto:admissions@wcsc.org.uk">admissions@wcsc.org.uk</a>

I wish to apply for a place at The Winston Churchill School for my child under one of the criteria below:

Please tick **ONE** 

Academic ability	
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 (PLEASE PRINT)	
Surname:	Forename(s):
Date of Birth:	Male Female
Child's Permanent Home Address:	,
Parent/Carer Full Name and Salutation:	Postcode:
Parent/Carer Email Address:	
Parent/Carer daytime contact telephone number (for emergency use):	
between 1 <sup>st</sup> -30 <sup>th</sup> September. Details of the test October. For Service and Staff criteria this form should be	usic criteria must be submitted directly to the school /audition will be sent via email in late September/early submitted at the time of application.  ation given on this form. Any offer of a place based on
Signed (Parent/Carer):	Date: