

SUPPLEMENTARY INFORMATION FORM
APPLICATION FOR A SCHOOL PLACE FOR
CHILDREN OF A MEMBER OF STAFF

Please complete the boxes below in printed capitals, following the instructions carefully.

Box 1: Personal Details Complete all the details here and then move on to Box 2.	
Full Name of staff member:	
Address:	Mobile No:
Postcode:	Home phone:
Date appointment at Copleston commenced:	
Proposed date of entry for child(ren) to Copleston:	
Date appointed to fill a vacant post for which there was a skills shortage:	

Box 2: Child's Details Complete all the details here and then move on to Box 3.	
Legal Surname:	Legal Forenames:
Address:	
Postcode	
Date of Birth:	Boy / Girl <i>(Please circle)</i>

Box 3: Agreement	
I confirm that I have included Copleston High School in the list of schools for which I have applied, on my Local Authority's application form.	
Signature of Parent/Carer: _____ Date: _____	

Office use only:	
☐	Agreed that the member of staff has been employed for two or more years at the time the application for admission to Copleston is made; or
☐	Agreed that the appointment was made to fill a vacant post for which there was a skills shortage.
Signed: _____ Name: _____	
Position: _____ Date: _____	