



## Supplementary Information Form (SIF) 2025-26

- You **must** apply for a school place using the Suffolk Common Application Form (CAF1) or by using the online facility. The SIF is not a valid application form in its own right.
- This form may be completed if **any** of your preferences are for St Matthew's Church of England Primary School. It is not compulsory to complete this form in order to make a valid application, but the information it contains may assist the Governors (as the Admissions Authority) in applying their oversubscription criteria.
- Please refer to the details of the school's admissions criteria before you apply.

*Forms which are altered or which contain incorrect information (eg. address, date of birth) will be considered invalid and this may prejudice your application.*

<b>Child's full name</b>	
<b>Child's date of birth</b>	
<b>Name of Parent / Carer</b>	
<b>Current permanent address</b>	

***If your church membership is relevant to your application please complete the next section.***

In which Church of England parish do you live? \_\_\_\_\_

Which Church / Place of Worship do you attend? \_\_\_\_\_

What is the denomination / faith of the Church / Place of Worship you attend? \_\_\_\_\_

How frequently do you attend church / Place of Worship? Weekly ( ) Monthly ( ) (Please tick)

**To be completed by your Parish Priest / Vicar / Minister**

(If there is currently no minister in post a senior church officer may sign)

*I can confirm, to the best of my knowledge, that the above information is accurate.*

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 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.

Signed \_\_\_\_\_

Dated \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Address \_\_\_\_\_

The information collected on this form may be passed to schools or to other Local Authorities as part of the admissions procedure. The information will be passed to the school to which the child concerned is finally allocated, where it will form part of the pupil database maintained by that school. Any personal information you provide will be dealt with in accordance with GDPR.

Please return this form to St. Matthew's Church of England Primary School. Thank you.