**Holy Trinity Academy, Priorslee**

**Admissions - Supplementary Information Form (Year 7)**

**2021-2022**

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| --- | --- |
| Child’s Full (Legal)Name: |  |
| Child’s Other (known by) Name: (if applicable) |  |
| Date of Birth: |  | Current Year Group: |  |
| Child’s Home Address: |  |
| Parent/Carer Names: |  |
| Relationship to Child: |  |
| Telephone No.: |  | Email: |  |
|  |
|  | Name of School | From | To |
| Current Primary School: |  |  |  |
| Previous School(s): |  |  |  |
|  |  |  |  |
| Please refer to the Academy’s **Admissions Policy** for details on entry criteria and order of priority.Please indicate your highest place in the order of priority by ticking **one** of the categories on the reverse of this form.**This form, along with the required evidence, must be returned by 31st October to the following address:****Mrs Benting, Holy Trinity Academy Admissions, Teece Drive, Priorslee, Telford TF2 9SQ****This form does not replace Telford and Wrekin Council’s Common Application Form but is designed to collect information specifically required by Holy Trinity Academy for the processing of applications for admission.****FOUNDATION APPLICANTS** |
| **Priority** | **Tick** | **Criteria** | **Supporting Evidence to submit with this form** |
| **1** |  | Children in public care (looked after children) who are of Catholic/Anglican faith. | Copy of child’s Baptismal Certificate or evidence of practicing faithful\* worship. |
| **2** |  | Baptised Catholic/Anglican Children with known medical or social or pastoral needs who have an exceptional need for a place at Holy Trinity Academy  | Copy of Baptismal Certificate andApplication supported by (an) appropriate professional reference(s) eg doctor, social worker, educational psychologist, priest or faith leader |
| **3** |  | Baptised Catholic/Anglican children and/or practicing faithful\* Catholic/Anglican children from one of our designated Christian Primary Schools:Bridgnorth, St John’s CPSMadeley, St Mary’s CPSNewport, SS Peter & Paul CPSOswestry, Our Lady & St Oswald CPSTrench, St Luke’s CPSShrewsbury Cathedral CPSWellington, St Patrick’s CPSBratton St Peter’s CE Primary SchoolCoalbrookdale & Ironbridge CE Primary SchoolDawley C of EDonnington Wood CE Junior SchoolDonnington Wood St Matthew’s Primary SchoolEdgmond St Peter’s Primary SchoolMadeley John Fletcher of Madeley CE and Methodist Primary SchoolNewport CE Junior SchoolSt George’s CE Primary SchoolSt Lawrence’s CE Primary, Preston upon theWeald MoorTibberton CE Primary SchoolWrockwardine Wood CE Junior School | Copy of child’s Baptismal Certificate or evidence of practicing faithful worship.IMPORTANTPlease see over subscription criteria below for further supporting evidence Name of School |
| **4** |  | Baptised Catholic/Anglican and/or practicing faithful\* Catholic/Anglican children from other Christian Primary Schools | Copy of child’s Baptismal Certificate or evidence of practicing faithful worship.Name of School |
| **5** |  | Baptised Catholic/Anglican and/or practicing faithful\* Catholic/Anglican children children from non- Christian Primary Schools | Copy of child’s Baptismal Certificate or evidence of practicing faithful worship.Name of School |
|  |  |  |  |
| **Please note the over subscription criteria:****Over subscription criteria-****In the event that foundation places are oversubscribed then the priority will be given to practicing faithful\* Catholic/Anglican children rather than just baptised children.** **\*The practicing faithful criteria will need to be supported by the clergy in the form of a written reference from the Parish Priest/Vicar where the child regularly \* attends****\*\*Regularly – constitutes at least twice per month over a two year period.** |
| **OPEN APPLICANTS**If there are more applicants than the available number of Open Places, places will be allocated according to the following criteria. These are stated in order of priority: |
| **Priority** | **Tick** | **Criteria** | **Supporting Evidence to submit with this form** |
| **1** |  | Children in public care (looked after or previously looked after children) |  |
| **2** |  | Children with known medical or social or pastoral needs who have an exceptional need (please refer to admissions policy for further information) for a place at Holy Trinity Academy | Application supported by (an) appropriate professional reference(s) eg doctor, social worker, educational psychologist, priest or faith leader |
| **3** |  | Children who have a sibling in the Academy at the time of application and at the time of admission (please refer to admissions policy for definition of sibling) | Sibling name(s) |
| **4** |  | Children of staff in either or both of the following circumstances: a) where the member of staff has been employed at the school for two or more years at the time at which the application for admission to the school is made, and/or b) the member of staff is recruited to fill a vacant post for which there is a demonstrable skill shortage. | Name of member of staff: |
| **5** |  | Non-baptised children from Catholic feeder schools belowMadeley St Mary’s Catholic Primary SchoolTrench St Luke’s Catholic Primary SchoolWellington St Patrick’s Catholic Primary SchoolNewport, SS Peter & Paul Catholic Primary School |  |
| **6** |  | Children who live in the designated feeder areas of Priorslee, Redhill and St Georges |  |
| **7** |  | All other children | No evidence required |

**In the event of over subscription then the criteria above will be applied and by distance from school within each category where required.**