



## Archbishop Tenison's School

### Supplementary Information Form – for Year 7 admission September 2022

Student Information	
First Name(s):	
Last Name:	
Date of Birth:	
Gender:	Male / Female
Home Address	Line 1:
	Line 2:
	Line 3:
	Line 4:
	Postcode:
Borough of Residence:	
Telephone Number:	

Type of Application	
Please indicate if you are applying for a <b>Foundation</b> place or an <b>Open</b> place	
<b>Foundation</b> <input type="checkbox"/>	<b>Open</b> <input type="checkbox"/>
Church of England <input type="checkbox"/>	Other Church <input type="checkbox"/>

Religion	
Religion:	
Church that family attend:	
Name of Vicar/ Rector/ Minister:	





**Please indicate below your reason for wanting your son/ daughter to attend Archbishop Tenison's School**

**Family Details:** Full names of parents/carers with whom the child lives. These contact details will also be recorded as emergency contacts in case of illness or injury during school hours.

Parent/Carer 1		Parent/Carer 2	
Title:		Title:	
First Name:		First Name:	
Last Name:		Last Name:	
Home No.:		Home No.:	
Mobile No.:		Mobile No.:	
Email Address:		Email Address:	
Relationship to student:		Relationship to student:	

Name of sibling(s) already attending Archbishop Tenison's:	
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**Current Primary School**

Name of school:	
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**Declaration**

I declare that I have completed this form to the best of my knowledge

Signature of Parent / Carer:	
Name of Parent/Carer:	
Date:	



Wisdom



Hope



Community



Dignity