



# BLUE COAT CHURCH OF ENGLAND ACADEMY

## SUPPLEMENTARY INFORMATION FORM

### APPLICATION FOR A PLACE ON FAITH GROUNDS

This form should only be completed for pupils whose families have been faithful and regular worshippers for at least twice a month for two years prior to application in a Church of England Parish Church or other Anglican place of worship, or in another Christian Church affiliated to Churches Together in Britain and Ireland (CTBI) and/or the Evangelical Alliance

**1. Full Name of Child** **Date of Birth (ddmmyy)**

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**2. Address and Postcode**

**Postcode:**

**3. Name and Address of Church/Place of Worship attended**

**4. Denomination (please tick)**

Church of England		Society of Friends (Quaker)	
Baptist		Salvation Army	
Methodist		United Reformed Church	
Orthodox		Other Christian	
Roman Catholic			

If you have ticked "Other Christian" above, please specify

**5. How long have you/the child worshipped here?**

Parent(s) / Guardian(s):

Child:

Years & Months

Years & Months

**6. How many times per month (including weekday services) do you/the child worship**

Parent(s)/Guardian(s):

Child:

x per month

x per month

**7. If you have moved within the last two years, please give details of your previous place of worship and length/frequency of attendance**

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**8. Does your child currently attend a designated “Feeder” Primary School (see Appendix A of the Academy Admissions Policy)?**

Yes  
No


If Yes, please state name of the Primary School Attended:-

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**9. Name of Minister/Faith Leader of your current place of worship & Contact details**

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**10. Declaration by Parent/Carer**

I certify that these details are, to the best of my knowledge, correct

Signed:

(Parent/Guardian)

Date:

Name of person signing (Please print in BLOCK CAPITALS)


**11. Declaration by Faith Leader (Your faith application will only be accepted if it is signed and stamped by your Faith Leader)**

I certify that the information in Sections 3-6 is, to the best of my knowledge, correct

Signed:

Official Stamp:

(Minister/Faith Leader)

Date:

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**THIS FORM MUST BE COMPLETED IN FULL, SIGNED AND STAMPED BY YOUR FAITH LEADER AND RETURNED DIRECTLY TO THE ACADEMY AT THE ADDRESS SHOWN BELOW BY 31<sup>ST</sup> OCTOBER 2025 AT THE LATEST**

**PLEASE RETURN TO:**

**Mrs K Karra  
Student Support Services  
Blue Coat CE Academy  
Birmingham Street  
Walsall  
WS1 2ND**

**Tel: 01922 720558**

**Email: [st-karra-k@bluecoatacademy.org](mailto:st-karra-k@bluecoatacademy.org)**