

FORM MR1

REQUEST FOR A MINISTER'S REFERENCE

Please fill in this section below and forward this form to your Minister.

Name of Applicant _____ Date of Birth __/__/__

Address _____

I am applying for a place at Holy Trinity Catholic and Church of England School.

Name of Parent/Carer _____

Dear Minister/ Faith Leader

The child named above is applying for a place at Holy Trinity Catholic and Church of England 3-16 school and has submitted your name as a supportive referee for them.

Our School is frequently oversubscribed and accordingly we have to apply certain criteria for the admissions of pupils to Foundation Stage (Reception) and into Year 7. These criteria are part of the Admissions Policy and are published on the LA website, the school website and are available to parents.

The clarity of the reference is very important as the Governors use this to support the categorisation of the applications in respect of any oversubscription.

Can you indicate how you know this child and whether you support the application to Holy Trinity.

PLEASE NOTE : The Reference may be made available to the Independent Appeals Panel where required.

Chair of Governing Body

Reference for _____

Name of Minister Faith Leader _____

Church _____

Address: _____

Post Code _____ Tel _____

E-Mail _____

1 Do you know this child?

2 Do you support the application to Holy Trinity?

3 Why do you support the application to Holy Trinity?

4 At the time of the application is your Church a full member of Churches Together in England (as defined at www.cte.org.uk)

YES NO

Signed _____ Date _____

Please return this form to the parents to submit with their application.