\$7.10hn \$

PLEASE ASK YOUR CHURCH MINISTER TO COMPLETE THIS FORM

St. John's Upper Holloway C.E. Primary School Pemberton Gardens, London N19 5RR

Telephone: 020 7272 2780 – Email: info@st-johnsholloway.islington.sch.uk

If you have links with a place of worship or church etc. please take this form to your minister at the place of worship and ask him/her to fill it in and send it to our school.

Please supply your minister with a **stamped addressed envelope** so that s/he can send this report directly to the school

REPORT BY MINISTER TO SUPPORT AN APPLICATION FOR ADMISSION TO THE SCHOOL

STRICTLY CONFIDENTIAL	ı			
Report by Minister on:	Name of child		Date of Birth	
Name of Minister:				
Name of place of worship You are in charge of:				
Address of worship				
Геlephone no.				
Who in the applicant's family attends your				
place of worship with the appl	icant?			
How long hove they been	Less than 2 years		More than 2 years	
How long have they been attending your church?			More than 2 years	
	Give date started attending:			
How regular is their	Weekly Fortnightly		Monthly Occasionally/	
attendance?	Weekly	Tortingitiy	Within	hardly ever
Please circle				
Ministers signature				
Date				