

CHURCH CRITERIA FORM

(To only be used if you are making an application on religious grounds)

To be completed by Parent/carer Name of Child:

Date of Birth:

Church Details¹

Name:

Address:

Telephone:

To be completed by Parish Priest or equivalent

This is to certify that (child or family member²)

Attends a service of public worship at the above Church regularly (at least twice per month for a minimum of two years).

Signed:

Print Name:

Position:

Church Stamp:

Date:

Definitions

¹Churches must be a member of, or affiliated to, Churches Together in Britain and Ireland or the Evangelical Alliance

²Family member must be Parent or Guardian (one parent / guardian is sufficient)