





## **BUSBRIDGE CofE JUNIOR SCHOOL**

## **Supplementary Information Form**

## To be completed for applications under category number 5 (Children of Staff)

Applications for entry on a staff basis must be supported **at the time of application**, by submission of this form. The application must be endorsed by the Headteacher and Chair of Governors and returned to the school by  $15^{th}$  January 2020.

Name of child: Surname:

|   | Forenames:   |
|---|--|
| Name of parent  | ts/guardians:  |
| Tel nos:  | Home: Mobile:  |
| Email:  |  |
| I am a member of staff of Busbridge CofE Junior School (being either a full-time member of staff or a part-time member working at least $40\%$ of the time which a full-time member of staff would work in my particular role) and either |  |
| • I have l  | been working at the school for at least two years at the time of the application, or |
| • I meet  | a skills shortage as identified and confirmed by the Headteacher and Governing Body. |
|   | age is  delete as applicable   |
| Signature of pa   | rent/guardian Date   |
| To be compl   | leted by the Headteacher and Chair of Governors of Busbridge CofE Junior School      |
| We confirm that the above named staff member (a) meets the criterion of working at the school for at least two years or (b) is fulfilling the need for a skills shortage. ( <i>please delete as applicable</i> )                          |  |
| Name of Headte  | eacher   |
| Signature of He   | eadteacher Signature of Chairperson  |
| Date  |  |