



Appendix B – Supplementary Information Form (SIF)

**Supplementary Information Form
for admission from 1 September 2026 – 31st August 2027
To be completed under criterion 4 for a child whose sibling has already left the school ONLY**

Name of child

Date of birth.....

Name of Parent(s)/Guardian(s)

Address

.....

Tel. Number (home)..... Mobile

E-mail

Name of sibling who attended Puttenham Church of England Infant School

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Date of sibling's admission to the School.....

Date of sibling leaving the School.....

Signature of Parent(s)/Guardian(s)

Date

To be completed by the Headteacher of Puttenham C of E Infant School

I confirm that attended Puttenham Church of England Infant School from the dates listed above.

Signature of Headteacher:Date.....

Parent(s)/Guardian(s) are to return this form, by the closing date of admissions: The Administration Officer, Puttenham C of E Infant School, School Lane, Puttenham, Guildford, Surrey GU3 1AS.