

**REQUEST FOR RELIGIOUS LEADER'S REFERENCE**

**PLEASE RETURN THIS FORM TO:**

**BRADFORD ACADEMY, TEASDALE STREET, BRADFORD, BD4 7QJ**

Email: [info@bradfordacademy.co.uk](mailto:info@bradfordacademy.co.uk)

Name and address of family making application:

<b>Name of Child</b>	
<b>Name of Parent(s)</b>	
<b>Address</b>	

Dear

The family named above have made an application for admission to Bradford Academy on the basis of Faith commitment. In order for us to consider this application on the basis of faith commitment we would ask that you provide the school with the following information.

1. What is the name of the place of worship? \_\_\_\_\_
2. Is the above child or family a member of your church/place of worship? **Yes/No?**
3. Is their attendance at worship **weekly/fortnightly/monthly/less?**
4. Is the family involved in any other way in the life of the religious community? **Yes/No**  
(Please give details.) \_\_\_\_\_
5. Which other members of his/her immediate family are involved in the place of worship?  
\_\_\_\_\_

**Thank-you for completing this form, please sign below and return to the school.**

**Signed** \_\_\_\_\_

**Tel** \_\_\_\_\_

**Name** \_\_\_\_\_

**Position** \_\_\_\_\_

**Date** \_\_\_\_\_



**Bradford Academy**