

Supplementary Information Form for Admissions 2024/25

To be completed for applications under criterion 4 (child of a member of staff). Please send completed forms to:

The Admissions Officer Hoe Valley School Egley Road Woking GU22 ONH

Child's Surname:
Child's First Name:
Child's Date of Birth:
Name of Staff Member:
Address:
Contact telephone number:
Contact email address:
Position at School:
Start Date:
I declare that I am a member of staff at Hoe Valley School and, in line with the published oversubscription criteria, I believe my child should be considered under the 'children of staff at the School' criterion.
☐ I have been working at the School for at least two years; or ☐ I meet a skills shortage
Please tick where appropriate.
Signed:
Date: