

## **GREAT BOOKHAM SCHOOL**

Griffin Way, Great Bookham, Leatherhead KT23 4JJ

Telephone: 01372 456774

Email: info@gbs.sfet.org.uk

## **Supplementary Information Form**

	To be com	•	application Iren of Sta	ns under criterion 3 aff)	
	entry on a staff ba e Admissions Office		supporte	ed by submission of t	his form which may be
Name of Child	Surname	Forename		Date of Birth	Current Year Group
-					•
Name of Staff Member					
Address					
Contact Telephone Number					
Email					
	er of staff in accord as appropriate)	lance with t	he school'	s admissions policy:	
* I am a full t least two year	•	senior leade	rship tean	n and have been work	ing at the school for at
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			OR		
* I meet a skii	lls shortage				
Signature of parent/guardian					Date
Approved by Great Bookham School					Date

For September 2025 Year R and Year 3 applications the form must be returned by 15 January 2025

Once completed this form should be returned to the Admissions Officer, **GREAT BOOKHAM SCHOOL**Griffin Way, Great Bookham, Leatherhead KT23 4JJ