



Supplementary Information Form for Admissions 2025/26

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 0NH*

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: _____