



Supplementary Information Form
For admission in 2016 – 2017

This form should be completed when applying for a place in a Catholic School in the Diocese of Arundel & Brighton.

ALL applicants should complete Part 1. Ensure you present with your application an original Baptism Certificate (where applicable) and evidence of address (e.g. utility bill, bank statement, council tax statement, etc, dated within the last 3 months)

Catholic applicants should also complete Part 2A and 4 (and 5 only if applicable). Then hand it to your parish priest or priest at the church where you normally worship to complete Part 2B. You should then return the form to the school.

If you are not a Catholic but a member of another Christian denomination or from another faith, please also complete part 3A and 4 (and 5 only if applicable). Then hand the form to your minister/faith leader who will add his/ her reference in Part 3B. You should then return the form to the school.

NOTE: You must also complete and return a Common Application Form (available from & returnable to the Local Authority).

PART 1 (To be completed by ALL parents or carers)

Surname of child _____		Forename(s) of child _____	
Date of birth _____		Boy <input type="checkbox"/>	Girl <input type="checkbox"/>
Religion/Denomination (eg Roman Catholic) _____		If no faith affiliation insert cross in box <input type="checkbox"/>	
Date and place of Baptism (if applicable) _____			
Child's home address * _____			
_____		Postcode _____	
Parent/Carer Name	Address	Contact Tel	Religion/Denom
Mother _____	_____	_____	_____
Father _____	_____	_____	_____
Siblings who will be attending the school at the time of admission _____			

* This should be a residential property that is your child's only or main residence at which your child spends the majority of weekday nights (see note in admission policy).

PART 2A (To be completed by CATHOLIC APPLICANTS)

Mass normally attended: Saturday evening vigil at _____ (time) or Sunday at _____ (time)
Parish in which you live (e.g. St Xxxxx, X Town) _____
Usual place of worship (if different) _____ how long have you worshipped there? _____ years
If you've recently moved to the parish please give details of your previous parish _____

PART 2B (To be completed by CATHOLIC PRIESTS ONLY)

I am satisfied that the child is a baptised Catholic (or where applicable), has been received into the Church Yes <input type="checkbox"/> No <input type="checkbox"/>	
Priest's name _____	Parish (or ethnic chaplaincy) _____ Tel _____
Address _____	
Priest's signature _____	Parish stamp or seal
Date _____	

PART 3A (To be completed by APPLICANTS of OTHER CHRISTIAN DENOMINATIONS / OTHER FAITHS)

Parish / faith community in which you live _____

Usual designated place of worship (if different) _____

How long have you worshipped there? _____ years

If you've recently moved, please give details of your previous parish or designated place of worship _____

PART 3B (To be completed only by MINISTERS/FAITH LEADERS of OTHER DENOMINATIONS/ FAITHS)

I am satisfied that the child has been baptised/dedicated/become a member of the faith Yes No

Name of minister/faith leader _____

Denomination/faith _____ Tel: _____

Address _____

Minister/faith leader signature _____ Date _____

PART 4 (To be completed by ALL parents or carers)

I confirm that I have completed a Local Authority Common Application Form Yes No

I confirm that I have read and understood the Admissions Policy and that the information I have given on this form is accurate and truthful. I understand that I must notify the school immediately if there is any change to these details and that should any information that I have given prove false, the governors may withdraw any offer of a place even if the child has already started school:

Signed _____ Parent/Carer Date _____

PART 5 (ONLY to be completed by parents or carers where medical/social needs apply)

Please add here any other information you may feel is relevant to this application in relation to the school's admissions policy in respect of exceptional medical or social needs of your child that make only this school particularly suitable for them. Strong and relevant evidence must be provided by an appropriate professional authority (e.g. qualified medical practitioner, education welfare officer, social worker or priest). (Continue on a separate sheet if necessary)

Please return the completed form by 15th January 2016 including original Baptism Certificate (where applicable – this will be photocopied and returned to you) and evidence of address (dated within the last 3 months) to :

Cardinal Newman Catholic Primary School, Arch Road, Hersham, Surrey KT12 4QT