



Acting Headteacher: Mr S Tucker

SUPPLEMENTARY FORM

Surname:		Forename:				
Date of Birth:		Male/Female:				
Address						
Postcode:		Email:				
Telephone Number:		Mobile:				
Preferred method of contact: Post/Telephone/Email/Mobile* (*please delete as appropriate)						
Name of Parent/Guardian:						
Please tick Year Group to enter:						
Primary School:	Reception	Yr 1	Yr 2	Yr 3	Yr 4	Yr 5
Secondary School:	Yr 7	Yr 8	Yr 9	Yr 10	Yr 11	

If moving on from primary school please state year the child is due to commence in Year 7:
September _____.

Has the child a brother or sister attending the school?	Yes/No
If Yes, in which year group and child's name	

**FOR CHILDREN WHO HAVE BEEN BAPTISED INTO THE ROMAN CATHOLIC FAITH
VERY IMPORTANT**

Applications for all Catholic children MUST BE ACCOMPANIED BY A COPY OF THE CHILD'S BAPTISMAL CERTIFICATE OR CERTIFICATE OF RECEPTION.

Failure to provide evidence of Baptism or Reception may affect the category into which the child's application is placed. (Recent arrivals in the UK may present a letter of recommendation from their Parish Priest).

Name of Parish where the child was Baptised:

Town/City where the child was Baptised:

Year of Baptism:

Signed: _____ (Parent/Guardian) Date: _____

Please return your completed form to the Admissions Officer at the address above

Date Applied		Date Received		Waiting List Yes/No
Next Governor Meeting		Place Offered Yr Gp		

