

PART B: CHURCH LEADER'S REFERENCE

TO BE RETURNED TO ST.MARY'S CATHOLIC PRIMARY SCHOOL

Please give this form to your Church Leader to support your application for a place at St. Mary's Catholic Primary School.

If you are a practising Catholic, please ask your Parish Priest for a completed Certificate of Catholic Practice

Parent to complete this section before giving it to a Church Leader

Name of Child: _____

Name of Parent(s): _____

Address: (the normal family home*)

Postcode

Telephone

**This is where the child normally lives. The address of another relative or a temporary address is not acceptable. Any attempt to mislead the school may result in the withdrawal of an offer of a place, particularly where proximity to the school forms part of the governing body's policy for admissions. If the child lives at more than one address, please give the address which is relevant in accordance with the admissions criteria of the school.*

Church Leader to complete

(Please circle)

1. The parents are known to me

Yes

No

2. The child is known to me

Yes

No

3. I consider the child to be a member of a practising

_____ **family**

Yes

No

(your denomination here)

NAME OF CHURCH LEADER: _____

POSITION : _____

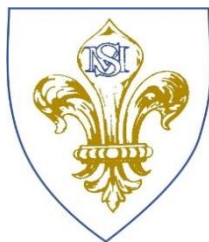
DATE: _____

Church Leader's Signature

The Parish
Crimp Seal
must be
used over
the signature
to
authenticate

Thank you for taking the time to complete this form. We are grateful for your prompt attention.
Please could you ensure the form is returned to the admission officer at the school named above

Privacy Notice: For further information on how and why we use your data please refer to our website:
www.stmarystilbury.co.uk Parents/Carers: Data Protection & GDPR



St. Mary's Catholic Primary School

SUPPLEMENTARY INFORMATION FORM

For photocopying purposes, please complete clearly in block letters using black ink

**PART A: To be completed by the parent(s)/guardian(s) and returned
directly to the school by the closing date of 15th January 2022**

Child's surname: Child's forename:

Address:

Telephone:

Child's date of birth : male/female * please delete

Religion:

Date and place of baptism: (**please attach a copy of the baptism certificate**)

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Details of any brothers and sisters who will be already attending the school at the date of admission:

Name: date of birth:

Name: date of birth:

Name and address of current school/nursery:

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Signature of mother:

Signature of father:

AFTER BEING SIGNED BY A CHURCH LEADER RETURN 'PART B' DIRECTLY TO THE SCHOOL