

# St. Cuthbert Mayne Catholic Primary School

## Supplementary Information Form

### For admission in 2017 – 2018

This form should be completed when applying for a place at the St. Cuthbert Mayne Catholic Primary School. Applicants should complete Part 1 and Part 4 (and Part 5, if applicable). Catholic applicants should also complete Part 2A and then hand it to their priest for him to complete Part 2B. He will return the form to you, for you to submit to the school. If you are not a Catholic but a member of another Christian denomination or from another faith or of no particular faith, please also complete part 3A and then hand the form to your minister/faith leader who will add his/ her reference in Part 3B before returning the form to you, for you to submit to the school.

**NOTE:** While it is not mandatory to complete a Supplementary Information Form (SIF), if the school does not receive a completed SIF, the governors will only be able to consider the application based on the information provided to the Local Authority on the CAF. Unless you are applying under criterion 3, 6 or 9, if a completed SIF is not received, this could result in being allocated a lower priority ranking.

#### PART 1 (To be completed by the Parent / Carer)

Surname of child: _____		Forename(s) of child: _____	
Child's date of birth: _____	<input type="checkbox"/> Boy	<input type="checkbox"/> Girl	
Child's home address *: _____		Postcode _____	
Parent/Carer's Name: _____		Parent/Carer Contact Tel: _____	
Parent/Carer's email address: -----			
<b>Faith Declaration:</b>			
- If your child is a member of the Catholic Church or another denomination or faith, please complete either A) or B) below, as appropriate			
- If neither A) or B) applies to your child, please go straight to Part 4 of this form.			
A) I confirm the child is a member of the Catholic Church	<input type="checkbox"/>	Yes	
Date and place of Baptism (or Reception into Church if applicable): _____		If 'yes', now go to Part 2A	
<b>OR</b>			
B) I confirm the child is a member of another denomination/ faith	<input type="checkbox"/>	Yes	Which denomination/faith? _____
Date and place of Baptism/Dedication (if applicable): _____		If 'yes', now go to Part 3A	

\* 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)
Where do you normally worship? _____
If you've recently moved to the parish please give details of your previous parish _____
How often do you attend Mass? <input type="checkbox"/> Weekly or at least 3 times/month <input type="checkbox"/> Once or twice a month <input type="checkbox"/> Less than once a month <input type="checkbox"/> Do not attend

**Instruction to parent/carer:** Please complete Part 2A and pass to the priest where the family worships as soon as possible

#### 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  No

Evidence of practice is for the 12 month period prior to the deadline for applications.

<b>PARENT/CARER</b>	
Is the parent/carer known to you?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Attendance at Mass weekly or at least 3 times/month	<input type="checkbox"/>
Attendance at Mass once or twice a month	<input type="checkbox"/>
Attendance at Mass less than once a month	<input type="checkbox"/>
How long has the parent/carer attended your church? _____	
Does not attend Mass	<input type="checkbox"/>

Please comment, if appropriate, only to clarify the Mass attendance above:

Priest's name: \_\_\_\_\_ Parish (or ethnic chaplaincy): \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

Priest's signature: \_\_\_\_\_ Parish stamp or seal:

Date: \_\_\_\_\_

**Instruction to the priest:** Please complete Part 2B and return this form to the parent / guardian.

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

Usual designated place of worship : \_\_\_\_\_

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

How often do you attend services?  Weekly or at least 3 times/month  Once or twice a month  Less than once a month  Do not attend

*Instruction to the parent/carer: Please complete Part 3A and pass to the family's faith leader as soon as possible*

**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

Evidence of practice is for the 12 month period prior to the deadline for applications.

PARENT/CARER	
Is the parent/carer known to you?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Attendance at services weekly or at least 3 times/mth	<input type="checkbox"/>
Attendance at services once or twice a month	<input type="checkbox"/>
Attendance at services less than once a month	<input type="checkbox"/>
How long has the parent/carer attended this designated place of worship? _____	
Does not attend services	<input type="checkbox"/>

Please comment, if appropriate, only to clarify the attendance at services above:

Name of minister/faith leader: \_\_\_\_\_ Denomination/faith: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_

Minister/faith leader signature: \_\_\_\_\_

Date: \_\_\_\_\_

*Instruction to minister/faith leader: Please complete Part 3B & return this form to the parent / guardian.*

**PART 4 (To be completed by the Parent / Carer)**

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 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: \_\_\_\_\_

**Return by 15<sup>th</sup> January 2017 to Admissions Officer, St. Cuthbert Mayne Catholic Primary School, Cranleigh, Surrey, GU6 7AQ together with supporting evidence of baptism and proof of address, which may be a recent council tax bill or utility bill.**