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BRENTWOOD DIOCESE CATHOLIC SCHOOLS IN YEAR SUPPLEMENTARY INFORMATION FORM



(PLEASE COMPLETE IN BLOCK CAPITALS)

**THIS FORM IS NOT REQUIRED FOR APPLICANTS UNDER CATEGORIES 5 OR 8 OF THE SCHOOL'S
ADMISSION CRITERIA 2019-20**

ENTRY INTO SCHOOL YEAR:

CHILD'S LEGAL SURNAME:

CHILD'S LEGAL FORENAME:

CHILD'S MIDDLE NAMES:

KNOWN AS:

DATE OF BIRTH:

RELIGIOUS STATUS OF CHILD: (Please indicate by placing a tick in the appropriate box - please note that a tick should be indicated in only a single box)

CATHOLIC

MEMBER OF OTHER
CHRISTIAN DENOMINATION

MEMBER OF OTHER
FAITH

IF CATHOLIC, DATE AND PLACE OF BAPTISM or RECEPTION:

CHILD'S HOME ADDRESS:

..... POSTCODE:

CURRENT SCHOOL:

NAME OF PERSON TO WHOM CORRESPONDENCE SHOULD BE ADDRESSED:

Mr. & Mrs/Mr./Mrs/Ms (Delete as appropriate):

RELATIONSHIP TO CHILD:

PLEASE NAME ANY SIBLINGS WHO WILL BE ATTENDING ST ANGELA'S IN YEARS 8-11 AT THE PROPOSED TIME OF ADMISSION (SEPTEMBER 2018)

NAME: FORM:

NAME: FORM:

NAME: FORM:

RELIGIOUS INFORMATION

NAME & ADDRESS OF PARISH IN WHICH YOU RESIDE:

.....

NAME & ADDRESS OF PARISH WHERE YOU ATTEND MASS, IF DIFFERENT:

.....

NAME & PARISH OF THE PRIEST WHO WILL COMPLETE YOUR REFERENCE:

.....

DECLARATION

I/We confirm that I/we have read the Admissions Policy of the school and that the information I/we have provided is correct. I understand that I must notify the school immediately if there is any change to these details and should any information that I/we have given prove to be inaccurate, the governing body may withdraw any offer of a place even if the child has already started school.

SIGNED:

PARENT/GUARDIAN

PRINT NAME:

DATE:

The data on this form will only be used within the school's admissions system, and will not be divulged to any third party outside the school admissions system in accordance with current Data Protection Legislation.

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FOR OFFICE USE ONLY

Received by: Date:

Documentation attached to this SIF:

Baptismal certificate: Date:

Proof of address (1): Date: Proof of address (2): Date:

Religious reference: Date:

O/S Category: Sibling: Y / N LAC: Y / N Deanery: Y / N

TO ENSURE YOUR DAUGHTER’S APPLICATION CAN BE PROCESSED CORRECTLY PLEASE ENSURE THAT:

1. The **In Year Common Application Form** has been fully completed and **submitted to the Local Authority**.
2. The **In Year Supplementary Information Form** has been fully completed, signed and returned to **St Angela’s Ursuline School** with the supporting documents.

Checklist – Have you enclosed?

ORIGINAL child’s Baptism Certificate or Service of Dedication	
ORIGINAL Proof address 1 <i>(See Admission Criteria for acceptable documents)</i>	
ORIGINAL Proof of address 2 <i>(See Admission Criteria for acceptable documents)</i>	
Religious reference <i>(not applicable for applicants in categories 5 or 8)</i>	
For Catholic applicants - Certificate of Catholic Practice (Please see http://www.dioceseofbrentwood.net/departments/education/school-admissions/ for more information on the Certificate of Catholic Practice)	
For applicants of any other religion - a letter confirming child’s membership and level of practice of at least <u>monthly</u> from Minister / Religious Leader	

Please read the school’s admission criteria for further information regarding acceptable supporting documents to accompany the SIF.

If you do not provide the information required in this form and return it to the school, with all supporting documentation by the closing date, your child may not be placed in the appropriate category and this could affect your child’s chance of being offered a place.

A receipt will be issued confirming that the school has received the SIF and the supporting documents.

THIS FORM MUST BE RETURNED DIRECTLY TO:

ADMISSIONS COORDINATOR,

ST ANGELA’S URUSLINE SCHOOL, ST GEORGES ROAD, LONDON, E7 8HU
(Please do NOT return this form to London Borough of Newham Pupil Services)