



Diocese of  
Brentwood

# St Angela's

URSULINE SCHOOL



St George's Road, Forest Gate, London, E7 8HU

Tel: 020 8472 6022

email: [office@stangelas-ursuline.co.uk](mailto:office@stangelas-ursuline.co.uk)

**BRENTWOOD DIOCESE CATHOLIC SCHOOLS  
SUPPLEMENTARY INFORMATION FORM  
SEPTEMBER 2026 INTAKE**

**(PLEASE COMPLETE IN BLOCK CAPITALS)**

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 ANOTHER FAITH or NO FAITH

IF CATHOLIC, DATE AND PLACE OF BAPTISM: \_\_\_\_\_

CHILD'S HOME ADDRESS: \_\_\_\_\_

POST CODE: \_\_\_\_\_

CURRENT SCHOOL: \_\_\_\_\_

**NAME OF PERSON/S TO WHOM CORRESPONDENCE SHOULD BE ADDRESSED  
(PARENTS OR GUARDIANS)**

FATHER: \_\_\_\_\_

MOTHER: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

DO YOU LIVE AT THE ADDRESS ABOVE? Yes / No

DO YOU LIVE AT THE ADDRESS ABOVE? Yes / No

**PLEASE NAME ANY SIBLINGS ATTENDING ST ANGELA'S IN YEARS 7-10 or YEAR 12  
AT THE PROPOSED TIME OF APPLICATION (OCTOBER 2025)**

NAME: \_\_\_\_\_ FORM: \_\_\_\_\_

NAME: \_\_\_\_\_ FORM: \_\_\_\_\_

NAME: \_\_\_\_\_ FORM: \_\_\_\_\_

NAME: \_\_\_\_\_ FORM: \_\_\_\_\_

**RELIGIOUS INFORMATION (IF APPLICABLE)**

NAME & ADDRESS OF PARISH IN WHICH YOU RESIDE:

\_\_\_\_\_

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

\_\_\_\_\_

**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 /wel 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.

**FOR OFFICE USE ONLY**

Received by:

Date:

Documentation attached to this SIF:

Evidence of Faith:  Date:

Proof of address (1):  Date:

Proof of address (2):  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 **Common Application Form** has been fully completed and **submitted to the Local Authority** by the closing date.
2. The **Supplementary Information Form** has been fully completed, signed and returned to **St Angela’s Ursuline School** with the **ORIGINAL** supporting documents by the closing date.

Checklist – Have you enclosed?

<b>RELIGIOUS EVIDENCE</b> <i>(not applicable for applicants in categories 5 or 8)</i>	
<b>Catholic applicants</b> - Baptism certificate <b>Christian applicants</b> - proof of membership to Christian faith <b>Other Faiths</b> - proof of membership to that faith	
<b>PROOF OF RESIDENCE</b> <i>(for all applicants)</i>	
<b>One from Section 1</b> <ul style="list-style-type: none"> <li>○ Council Tax bill for this financial year</li> <li>○ Current housing benefit entitlement letter</li> <li>○ tenancy agreement for your council housing or housing association property</li> <li>○ tenancy agreement for your housing privately rented from a landlord accredited by LBN (for tenancies which started before 1 January 2013) or</li> <li>○ tenancy agreement from a landlord licensed by LBN (for tenancies which started from 1 January 2013)</li> <li>○ letter from the National Asylum Support Service (NASS) telling you of your housing address</li> <li>○ letter from Adult or Children’s Services Asylum Team, telling you of your housing address</li> </ul>	
<b>One from Section 2 (dated within the last three months)</b> <ul style="list-style-type: none"> <li>○ gas bill, payment schedule or reminder</li> <li>○ electricity bill, payment schedule or reminder</li> <li>○ water bill, payment schedule or reminder</li> <li>○ Mobile phone or telephone bill or reminder</li> </ul>	

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

**THE CLOSING DATE FOR THE SIF TO BE RETURNED TO THE SCHOOL IS**

**Friday 31st October 2025 at 4pm**