## PLYMOUTH ROMAN CATHOLIC PRIMARY SCHOOLS

**ST JOSEPH'S** Supplementary Information Form

ONLY COMPLETE THIS FORM IF YOU ARE APPLYING FOR A PLACE AT A PLYMOUTH ROMAN CATHOLIC PRIMARY SCHOOL.

SECTION I: This section should be completed for all applicants

Return this form direct to the school.



SECTION 1. This section should be compr	cted for an applicants
Full name of child or children	
Date of birth	
(i) Does your child have a brother or sister (please tick)	currently in the school? □Yes □No
If 'yes' please give her/his name and current class	:
Are you applying for another child to join this ye	ar group? 🗆 Yes 🗆 No (please tick)
If 'yes' please give her/his name:	
Does the child have a parent who is a member o tick)	f staff at the school? □Yes □No (please
Name of parent:	
Post held:	
'yes' to a section (with the appropriate evidence of the rest of the form. Simply sign the declaration at return it to the school office. Please note, even if you are not able to answer 'ye whom you are applying will still be admitted if the	es' to any of the sections 2-6, the child for
SECTION 2:	
Is your child a baptised Catholic?   Tes   No	(please tick)
If 'Yes', please attach a copy of her/his baptismal appropriate Catholic priest to sign the statement	
I confirm that the child named on this form is a b	paptised Catholic.
Name of Priest:	
Parish:	
Signature:	Date:

SECTION 3:		
Is at least one of this child's parents or guardians a baptised Catholic?		
If 'Yes', please ask an appropriate Catholic priest to sign the statement below or provide your own Baptismal Certificate (i.e. parent's Certificate).		
I confirm that at least one of the parents of the child named on this form is a baptised Catholic.		
Name of Priest:		
Parish:		
Signature: Date:		
SECTION 4:		
Is this child a member of a Christian church/denomination other than Catholic? ☐Yes ☐No (please tick)		
If 'Yes', please ask an appropriate minister of religion to sign the statement below.		
I confirm that the child named on this form is a member of our church/denomination.		
Name of Minister:		
Title:		
Church and location:		
Signature: Date:		
SECTION 5:		
Is this child a member of a faith community other than Christian?   Yes   No (please tick)		
If 'Yes', please ask an appropriate minister of religion to sign the statement below.		
I confirm that the child named on this form is a member of our faith community.		
Name of Minister:		
Title/Ministry:		
Faith and local centre of worship:		
Signature: Date:		

it. It is not essential to sign your agreement with th not feel able to sign will still gain admission to the s	•	
'This child is not a member of any particular denomination or faith tradition but, as parents/guardians, I/we would like our child to be admitted to the school as it is our desire that s/he receives schooling within a Catholic Christian tradition'.		
Signature of Parent/Guardian:	Date:	
SECTION 7: This section should be completed for all applicants		
'I certify that, to the best of my knowledge, the information I have given in this form is accurate'		
accurate'	ū	
accurate' Name:		

Please consider whether the statement below applies to you. If so, sign in the space below

**SECTION 6:**