



**St Patrick's Catholic Primary School  
Nova Lane  
Birstall**

**SUPPLEMENTARY INFORMATION FORM FOR ADMISSION TO  
A VOLUNTARY AIDED CATHOLIC SCHOOL**

The school to which you are applying is a voluntary aided Catholic school. The school is designated as a school with a religious character and as such is permitted to give priority to applicants who are of the faith of the school.

The governing body has a responsibility for admissions to the school. In order to apply the school's oversubscription criteria, the governing body requires additional information that is not collected on the local authority's Common Application Form. This information can be supplied by completing this Supplementary Information Form. **FAILURE TO COMPLETE THIS FORM MAY AFFECT THE OVERSUBSCRIPTION CRITERIA IN WHICH YOUR CHILD IS PLACED.**

|   |  |
|---|--|
| <b>Full name of child<br/>(Including surname)</b>       |  |
| <b>Date of birth</b>                                    |  |
| <b>Child's permanent address including<br/>postcode</b> |  |
| <b>Contact telephone number(s)</b>                      |  |
| <b>Religion of child</b>                                |  |

| <b>Full name(s) of Parent(s)/carer(s)</b> | <b>Relationship to child</b> |
|---|------------------------------|
|   |                              |

If, at the time of admission, you will have other children attending this school, please provide details below:

| Full name (s) | Date(s) of birth |
|---------------|------------------|
|               |                  |
|               |                  |
|               |                  |

**CATHOLIC CHILDREN**

If you think that your application should be considered under category 1, 2, 3, 4 or 5, then you must supply the information below and attach the evidence requested.

|  |  |                              |  |
|--|--|------------------------------|--|
| Date of baptism (you must attach proof of baptism, i.e baptism certificate or a letter from your priest) |  | Place of baptism and address |  |
| Name of your parish priest   |  |                              |  |

Parent/Carers signature -----

Birth & Baptism attached -----

Date form completed -----

**PLEASE RETURN YOUR COMPLETED FORM TO THE SCHOOL**

|                                |   |
|--------------------------------|---|
| <b>For school use only</b>     |   |
| Date SIF received _____        | Name of person receiving form _____                                 |
| Birth <input type="checkbox"/> | Baptism <input type="checkbox"/> Nursery _____      Reception _____ |