



SUPPLEMENTARY INFORMATION FORM

Please complete this form if you wish your child to be considered under the faith criterion and return it to St Michael's RC Primary, Ribble Drive, Whitefield, M45 8NJ.

Parent's name	.....	
Child's surname	.....	Christian names	.....
Date of birth	.....	
Address	..... .....	
Post code	.....	Telephone number	.....
Please confirm that your child is a baptised Catholic: Yes <input type="checkbox"/> No <input type="checkbox"/>			
Place of baptism	.....	
Parish community in which you live/worship?			

Note: Original or certified copies of your child's Baptismal Certificate, Birth Certificate or Passport and proof of address must be brought to school to be photocopied. The school will not take responsibility of returning these items.

Signed (Parent/Carer)	Date
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