



St. Joseph's RC Primary School, George Row, London SE16 4UP

Supplementary Information Form

Note¹ For Reception places, you must also complete and return a Common Application Form (CAF). This form is available from the school and/or Local Authority of the Borough of residence.

Note² If you are using this form to apply for a place in our school Reception classes, the deadline for the submission of this form is the date shown on the Local Authority CAF. **Any Supplementary forms received after this date, will be treated as 'Late' applications.**

PART 1: (To be completed by all parents or carers)

Surname of child: _____ Date of birth: _____

Christian/forename(s) of child: _____ Boy Girl

Religion/Denomination: (e.g. Roman Catholic) _____

Date and place of Baptism (if applicable): _____

Parents' names: _____

Parents' religions/denominations: _____

Home address: _____
 _____ Postcode _____

Contact telephone numbers: Home: _____ Mobile 1: _____
 Work: _____ Mobile 2: _____

If **Catholic**, indicate which Mass you normally attend:
 Saturday at _____ (time) or Sunday at _____ (time)

Parish in which you **live** (e.g. Holy Innocents, Orpington) _____

Usual place of worship (if different): _____

How long have you worshipped there? _____ years.

(If you have recently moved to the parish please give details of your previous parish: _____
 _____)

How often do you attend Mass? weekly once or twice a month less often

Please add here any other information you may feel is relevant to this application in relation to the school's admissions policy in respect of exceptional medical, social or pastoral needs of your child that make only this school suitable for them. Strong and relevant evidence must be provided by an appropriate professional authority (e.g. qualified medical practitioner, education welfare officer, social worker or priest).
(Continue on a separate sheet if necessary)

Please give details of any siblings who will be a pupil at St. Joseph's School on time of entry for the above child:

Name: _____ Class: _____ Date of birth: _____

Name: _____ Class: _____ Date of birth: _____

I confirm that the information we have given on this form is accurate and truthful:

Signed: _____ Parent/carers Date: _____

For school use only:
 Date received: _____

Documents received: Baptism Certificate Proof of address: Proof of ID

