



Supplementary Information Form: for entry in September 2018

**YOU MUST COMPLETE AND RETURN THIS FORM DIRECTLY TO THE SCHOOL NOT THE LA.
Please complete in **BLOCK CAPITALS** and return to Cardinal Heenan Catholic High School
by 4pm on Friday 20 October 2017.**

SURNAME OF CHILD _____	FORENAME(S) _____
DATE OF BIRTH _____	SCHOOL CURRENTLY ATTENDED _____
ADDRESS OF CHILD _____	
_____ POSTCODE _____	
LOCAL AUTHORITY (PLEASE CIRCLE): KNOWSLEY / LIVERPOOL / SEFTON / OTHER _____	

IS YOUR CHILD (PLEASE TICK):
A) BAPTISED ROMAN CATHOLIC <input type="checkbox"/> COMPLETE SECTION A & C
B) NON CATHOLIC (OTHER CHRISTIAN FAITHS/OTHER FAITHS) <input type="checkbox"/> COMPLETE SECTION B & C

A) FOR BAPTISED ROMAN CATHOLICS ONLY (A baptismal certificate and the completion of the form is required to confirm your child is a baptised Roman Catholic.)
MONTH AND YEAR OF BAPTISM _____
PARISH _____ CHURCH _____

B) OTHER CHRISTIAN FAITHS/OTHER FAITHS
(A baptismal certificate and the completion of the form is required to confirm your child is a baptised Christian or baptised into another faith.)
a) If you want to be considered under the FAITH CRITERIA as other than Roman Catholic state your Christian denomination: _____. Proof of Baptism or confirmation in writing to show that your child is a member of a faith community by an appropriate Minister of Religion is required.
b) If you belong to a faith OTHER THAN the Christian faith, state to which faith you belong. _____. An appropriate faith leader would need to confirm in writing by completing the statement below that your child is a member of their faith group.
Confirmation of Faith Community Membership (CHRISTIAN/OTHER FAITHS)
Minister/Leader (print name) _____
Address: _____
Position held: _____
Signed and dated: _____



Parent/guardian - please complete and sign below to confirm the details given on the form are accurate:

C) SIGNED CONFIRMATION

SIGNED _____ NAME (please print) _____

RELATIONSHIP TO CHILD _____ DATE _____

CONTACT NO _____ EMAIL _____

***DOES YOUR SON HAVE A SIBLING WHO WILL BE A STUDENT AT CARDINAL HEENAN CATHOLIC HIGH SCHOOL IN SEPTEMBER 2017?** YES NO IF YES PLEASE STATE THE FOLLOWING:

NAME _____ DOB _____ YEAR GROUP IN SEPT 2017: _____

PLEASE NOTE:

1. IF THE SIBLING IS CURRENTLY IN Y13 WE WILL NOT BE ABLE TO CONSIDER THE APPLICATION USING THE SIBLING RELATIONSHIP, AS HE/SHE WILL NOT BE ON ROLL THE FOLLOWING SEPTEMBER.

2. IF THE SIBLING IS CURRENTLY Y11 THE SIBLING RULE WILL ONLY APPLY IF WE ARE AWARE HE IS LIKELY TO RETURN TO OUR Y12 THE FOLLOWING SEPTEMBER.

Parents must also complete the Local Authority application form. If the school is oversubscribed, failure to complete this form may result in your application for a place in this school being considered against a lower priority criteria, as the Governing Body will have no information upon which to assess the application on the basis of the applicant's baptism or membership of a faith community, and confirmation of address.

Checklist:

1. Please tick where appropriate:

- I/We have enclosed a copy of my child's Baptism Certificate (**Catholic applicants**)
- I/We have enclosed a copy of my child's Baptism Certificate (**Christian children other than Catholic**)
- I/We have enclosed confirmation of my child's faith group (**other faiths**)

2. I/We have completed the Local Authority Preference Form naming Cardinal Heenan Catholic High School as one of the choices and returned it to the Local Authority.

3. I/We enclose proof of our permanent address (Household bill, council tax bill etc).

FOR OFFICE USE ONLY

Supplementary form received Date: _____ Office staff: _____ Receipt given

Confirmation of address Date: _____ Office staff: _____

Copy of child's Baptism Certificate (Roman Catholic applicants) Office staff: _____

Copy of child's Baptism Certificate (Christian children other than Catholic) Office staff: _____

Confirmation of child's faith group (other faiths) Office staff: _____