

**BRENTWOOD DIOCESE CATHOLIC SCHOOLS SUPPLEMENTARY INFORMATION FORM 2024 INTAKE**

  **(PLEASE COMPLETE IN BLOCK CAPITALS)**

CHILD’S SURNAME:

FORENAME/CHRISTIAN NAMES:

DATE OF BIRTH:

RELIGION:

IF CATHOLIC, DATE AND PLACE

OF BAPTISM or RECEPTION :

HOME ADDRESS:

 POSTCODE:

CURRENT SCHOOL:

**FULL NAMES OF PARENTS (CARERS/GUARDIANS):** CONTACT DETAILS:

PARENT 1: Home Tel:

ADDRESS: Mobile Tel:

 Work Tel:

E-mail Address ……………………………………………..

PARENT 2: Home Tel:

ADDRESS: Mobile Tel:

 Work Tel:

E-mail Address ……………………………………………..

**NAME OF PERSON TO WHOM CORRESPONDENCE SHOULD BE ADDRESSED:**

Mr & Mrs/Mr/Mrs/Ms **(Delete as appropriate)**

NAME:

RELATIONSHIP TO CHILD:

**Cont’d …**

**PLEASE NAME ANY SIBLINGS WHO ATTEND SACRED HEART OF MARY GIRLS’ SCHOOL IN YEARS 7-13 AT THE TIME OF APPLICATION**

NAME: FORM:

NAME: FORM:

NAME: FORM:

**RELIGIOUS INFORMATION**

NAME & ADDRESS OF PARISH IN WHICH YOU RESIDE:

NAME & ADDRESS OF PARISH WHERE YOU ATTEND MASS, IF DIFFERENT:

NAME & PARISH OF THE PRIEST WHO WILL COMPLETE YOUR REFERENCE:

……………………………………………………………………………………………………………………………………………….

**DECLARATION**

**I/we confirm that the information on this supplementary information form is true to the best of my/our knowledge and belief.**

DATE: ………………………… SIGNED: ……………………………………………………PARENT/CARER/GUARDIAN

PRINT NAME: …………………………………………………………………………………………………………………………….

**TO ENSURE YOUR DAUGHTER’S APPLICATION CAN BE PROCESSED IMMEDIATELY PLEASE ENSURE THAT:**

* the **Common Application Form** has been fully completed and **submitted to the Local Authority**
* this **Supplementary Information Form** has been fully completed, signed and the following documents are attached (originals are not accepted):
* PHOTOCOPYof Certificate of Baptism or Receptioninto the Catholic Church
* PHOTOCOPY of Birth Certificate
* you have met/arranged an appointment with the priest who will provide your Certificate of Catholic Practice
* If your daughter is not a Catholic you should obtain a letter which states that your daughter is practising her faith, from your Minister/Religious Leader before the closing date for applications
* **THIS FORM MUST BE RETURNED DIRECTLY TO:**
* **SACRED HEART OF MARY GIRLS’ SCHOOL, St Mary’s Lane, Upminster, Essex, RM14 2QR**
* **(Please do NOT return to London Borough of Havering Education Department.)**