

Holy Ghost Catholic Primary School

Nightingale Square, London, SW12 8QJ 020 8673 3080

Supplementary Application & Religious Inquiry Form Reception Class September 2017



In common with all Catholic primary schools in the Archdiocese of Southwark, applicants to Holy Ghost School must complete this supplementary application & religious inquiry form for return to the school by the deadline set by Wandsworth LA: 15th January 2017. Please complete only Part 1 and Part 4. You will need to have Part 2 or 3 completed and signed by your Parish Priest or Minister. All information given will be confidential to those directly concerned with admissions at the school and your Parish Priest or Minister. This form is required in addition to the Common Application Form which must be submitted directly to Wandsworth LA. You are strongly advised to read the school's admissions policy carefully, before completing this form.

PART ONE – To be completed by parent(s) or guardian(s) of all applicants Surname of child: Christian/Forename(s): Religion: Date of Birth: _____ Date of Baptism: _____ Place of Baptism: Mother's / Guardian's name: ______ Religion: _____ Father's / Guardian's name: ______ Religion: _____ Home address: This must be the address where the child normally lives _____ Postcode: _____ Contact number: _____ (Mother/Father/Guardian) Contact email address: _____ (Mother/Father/Guardian) Borough in which you reside: _____ (eg Wandsworth, Lambeth) If Catholic, please indicate which Mass you normally attend (day & time): Parish in which you live: (eg Holy Ghost, St Anselm's) Parish where you worship: (if different) Applications will be ranked in order of regular, occasional and irregular worship. Priority will be given to those who have evidence of How long have you worshipped there? _____ years. weekly worship. If less than 3 years worship at this parish, please provide evidence of worship from your previous parish priest with this application or, if you are unable to provide such evidence, a covering letter with reasons. How often do you attend Mass? Regularly (ie every Saturday evening or Sunday for a period of at least 3 years) $Occasionally \quad \textit{(ie twice a month, or those who are now practising regularly but cannot provide} \\$ evidence of regular practice over a 3 year period) Irregularly (ie less than once a month) **Details of Siblings** If your child already has an older brother or sister attending Holy Ghost School, who will still be on the roll in September 2017, please give details: Please add any other information that you may feel is relevant to this application in relation to the school's admissions policy in respect of an established medical need that may make only Holy Ghost school suitable for your child. Strong and relevant evidence must be provided by an appropriate authority (eg qualified medical practitioner or educational

psychologist). Continue on a separate sheet if necessary.

PART TWO - to be completed by the Parish Priest of the parish you normally attend.	
I am satisfied that the child is a baptised Roman Catholic, or has been received into Full Communion with the Roman Catholic, or is baptised into a Church that is in Full Communion with the Church of Rome.	olic
Is the family known to you? YES NO	
Please indicate which statement best describes the practice of the family:	
Regular attendance at Mass (ie every Saturday evening or Sunday for a period of at least 3 years) Occasional attendance at Mass (ie twice a month, or those who are now practising regularly but cannot provide evidence of regular practice over a 3 year period) Irregular attendance at Mass (ie less than once a month) Unknown attendance at Mass	
How long has the parent(s) attended your church?	
Can you verify the details regarding practice as stated by the family in Part 1 YES NO	
Please provide any explanatory or additional comments which may be helpful to the school in considering this application:	
Name of Priest: Name of Parish: (or Ethnic Chaplaincy) Address:	
Signature of Priest:	
Date:	
PART THREE - to be completed by a Minister or equivalent Leader of Worship	
I confirm that this family are members of our faith community \Box The family is not known to me \Box	
Name of the Minister/Leader: Denomination/faith:	
Parish or faith community:	
Address: Tel:	
Signed: Date:	
PART FOUR – to be completed by parent(s) or guardian(s) of all applicants	
 I/we have received, read and understood the full details of the admissions' policy published in the school prospectus. I/we agree that the information on this form is true and accurate. I/we understand that any false or deliberately misleading information given on this form may render this application invalid, or lead to the offer of a place being withdrawn. 	ing
Signature(s): Date:	
I/we have also completed the 'Wandsworth Common Application Form' for admission to a Wandsworth primary school in September 2017	
Documents enclosed: Baptismal Certificate	
(Please tick boxes) Current Financial Year's Council Tax Statement	