



ADMISSION TO ALSTON LANE CATHOLIC PRIMARY SCHOOL, LONGRIDGE  
SEPTEMBER 2026

MATER ECCLESIAE CATHOLIC MULTI ACADEMY TRUST



SUPPLEMENTARY INFORMATION FORM

If you are applying for a place for your child at Alston Lane Catholic Primary School, please complete this form in addition to the Common Application Form available online or issued by the Local Authority.

This supplementary information form will assist the Governors of the school in deciding whether your child qualifies for a place. Failure to complete the form may affect where your child is placed within the oversubscription criteria.

**This form must be completed by the parent/guardian.**

Name of child/applicant: \_\_\_\_\_

Address of child/applicant: \_\_\_\_\_  
\_\_\_\_\_

Name(s) of any sibling(s) who will be attending Alston Lane at time of the applicant's planned admission in September 2026

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

**If you are applying on faith grounds, please complete Section A if your child is baptised Catholic or  
Section B for Christian or other faiths:**

**Section A – Baptised Roman Catholic Applicants**

Parish or area of faith community in which you live: \_\_\_\_\_  
e.g. *Our Lady and St Michael's, Longridge*

Name of the Parish or area of faith community in which you worship: \_\_\_\_\_

**If a Catholic**, I confirm that the applicant is a baptised Catholic and enclose proof of baptism e.g. copy of Baptismal Certificate or details of place and date of baptism or letter from a priest confirming applicant's preparation for Catholic baptism or faith membership.

Yes  No  Date of Baptism: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Signed (Minister of Religion) \_\_\_\_\_

Name and position held \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

**PART B (For non-Catholic applicants. To be completed and signed by a Minister of Religion)**

6. If a **Christian**, I confirm that the applicant is a baptised Christian and enclose proof of baptism.

Yes  No

7. If belonging to a **faith other than Christian** please confirm that the applicant is a member of your faith community.

Yes  No

Signed (Minister of Religion) \_\_\_\_\_

Name and position held \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

**Please return this form to the school before 15<sup>th</sup> January in the year of planned admission:**

Alston Lane Catholic Primary School  
Preston Road  
Longridge  
Preston  
PR3 3BJ  
01772 783661