



St Mary's Catholic Primary School
Supplementary Information Form 2024-2025

This form should be completed when applying for a place in a Catholic School in the Archdiocese of Southwark. Please complete and sign the form below and, if you are Catholic, hand it to your parish priest or the parish priest at the church at which you normally worship. He will add his reference in Part 2. If you are not a Catholic, please just complete Part 1 and return it to the school office.

NB YOU MUST ALSO COMPLETE AND RETURN A PRIMARY IN- YEAR APPLICATION FORM TO BROMLEY LOCAL AUTHORITY. THESE FORMS ARE AVAILABLE ON LINE AT www.bromley.gov.uk OR FROM THE BROMLEY CIVIC CENTRE.

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

SURNAME OF CHILD: _____ CHRISTIAN/FORENAME(S) OF CHILD: _____

DATE OF BIRTH: _____

RELIGION/DENOMINATION: (EG ROMAN CATHOLIC) _____

BOY GIRL

DATE AND PLACE OF BAPTISM (IF APPLICABLE): _____

PLEASE ATTACH A COPY OF YOUR CHILD'S BAPTISM CERTIFICATE TO THIS FORM, IF APPLICABLE

DOES YOUR CHILD ALREADY HAVE A SIBLING AT ST MARY'S? YES/NO:

NAME OF SIBLING: _____ CLASS: _____

PARENTS' NAMES: _____

PARENTS' RELIGIONS/DENOMINATIONS: _____

HOME ADDRESS: _____

POSTCODE: _____

CONTACT NUMBERS: HOME: _____ WORK: _____

IF CATHOLIC, INDICATE WHICH MASS YOU NORMALLY ATTEND:

SATURDAY AT _____ (TIME) OR SUNDAY AT _____ (TIME)

PARISH WHERE YOU ATTEND MASS (EG ST. EDMUND'S, ST MARK'S, HOLY ROSARY) : _____

USUAL PLACE OF WORSHIP (IF DIFFERENT): _____

HOW LONG HAVE YOU WORSHIPPED THERE? _____ YEARS

HOW OFTEN DO YOU ATTEND MASS? WEEKLY AT LEAST ONCE A MONTH LESS OFTEN

I CONFIRM THAT THE INFORMATION GIVEN ON THIS FORM IS ACCURATE AND TRUTHFUL:

Signed: _____ Parent/Carer Date: _____



PART 2

TO BE COMPLETED BY CATHOLIC PRIESTS ONLY

I am satisfied that the child has been baptised or received into the Roman Catholic Church or has been baptised or received into a Church that is in full communion with Rome.

Yes No

EVIDENCE OF PRACTICE

<u>PARENT/CARER</u>	<u>CHILD</u>
Are the parents known to you? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the child known to you? Yes <input type="checkbox"/> No <input type="checkbox"/>
Regular attendance at Mass (i.e. weekly) <input type="checkbox"/>	Regular attendance at Mass (i.e. weekly) <input type="checkbox"/>
Occasional attendance at Mass (i.e. at least once a month) <input type="checkbox"/>	Occasional attendance at Mass (i.e. at least once a month) <input type="checkbox"/>
Irregular attendance at Mass (i.e. less than once a month) <input type="checkbox"/>	Irregular attendance at Mass (i.e. less than once a month) <input type="checkbox"/>

PRIEST'S NAME: _____

PARISH (OR ETHNIC CHAPLAINCY): _____

ADDRESS: _____

TEL: _____

PRIEST'S SIGNATURE: _____ DATE: _____

PARISH STAMP OR SEAL: