

## "Deo Reddite Dei"

Gender:

Male

Female

"Give back to God what belongs to God"

Date Form Rec'd:	Date Received @ SJF Stamp
LAC?	
Sibling?	
SEND?	
Baptism Cert?	
Reference?	
Criteria	
Criterion	
Distance:	

## Supplementary Information Form for Admission Only to be used for entry into Year 7 in 2022/2023

This form should be completed after reading the current Admissions Policy for St John Fisher Comprehensive School 2022/23 available on the school website.

Section A Section B	To be completed by the parent / carer. Section to be completed by the parent / carer to provide background information for the					
Section C	Priest / Minister / Faith Leader. To be completed by the Priest / Minister or Faith Leader.					
Section A	Information about Child and Religious Practice					
1. Details of the	e child					
Surname (as on	Birth Certificate)					
Forename(s) (as	s on Birth Certificate)					
Known As Name	e, if different from above:					
Home address						
	Mobile number					
Daytime telepho	ne number(s)					
Email Address (	in case of query)					
Date of Birth						
If a place is offered, a copy of your child's birth certificate will be required.						

A	mic(s) or parents(s) / care	• •	Parent/	Carer*	
В		Parent/Carer*			
	ls of any sibling(s) who will mber 2023 <u>and</u> living at the s				
	Surname	Forename	Date of Birth	Year Group	
1					
3					
Has	ious denomination of child your child been Baptised, C e ✓ as applicable Yes				
Date	of Baptism/Christening/De	edication			
P	lease attach a photocopy NB: your applic	of the Baptism / Chris ation may not be cons		Certificate.	
	arations ensure that you complete t	the following by placing	a tick in the boxes be	low.	
	have named St John Fishe	er on my child's Commo	n Application Form.		
	I have attached copies of n form.	ny child's Baptism / Chri	istening / Dedication (	Certificate to this	
child's	re that the details on this for Common Application Form Inmon Application Form my	. I understand that if I do	o not name St John F		
as pos	upplementary Information F sible for completion and ret se your application may no	urned to St John Fisher	•		
	nild's Common Application ty for secondary transfer.	Form should be returned	d to your home Local	Education	
NB: <b>If</b> y	ou do not apply to the Lo	ocal Authority your ap	plication will not be	considered.	
This Suppossible	ipplementary Information F e.	orm should be returned	to St John Fisher Scl	hool as soon as	
Please	state which Local Authority	y you live in?			
Signed	Signed: Parent / CarerDate				
Please	send this form to your nom	ninated priest/minister/fa	ith leader together wi	th a stamped	

Name(s) of narents(s) / carer(s)

Please send this form to your nominated priest/minister/faith leader together with a stamped envelope addressed to: Admissions Secretary, St John Fisher School, City Way, ME1 2AF to whom the form should be returned together with a copy of your child's Baptism/Christening or Dedication certificate. This must be sent in good time to be received by the School College before the deadline of 31st October 2022.

## **Section B**

Please note: All applications are verified and in order to do this, the following lists are used:

- Catholics include members of the Ordinariate and the Latin and Oriental Rite Churches that are in union with the Bishop of Rome.
- Children of families who are members of other Christian denominations that are part of Churches Together in England.
- Evidence of Baptism (or dedication) provided by a priest or minister of a designated place of worship will be required.

Please provide the following additional information to assist your nominated priest/minister in completing Section C of this form.

Name of Child
Current School
Date and place of First Holy Communion
Name of the parish in which you live
Address
Name of the Parish Priest/Minister
Name of the Priest/Minister to whom you are known
How long have you lived in the parish?
Name of the parish in which you regularly worship
(if different from your parish church)
Address
Name of the Parish Priest/Minister
Name of the priest/minister to whom you are known
How long have you been worshipping at the church?
Any further comment you think may be helpful to your priest/minister:

## Section C

Relevant Section to be completed by the priest/minister -  $Please \checkmark boxes$  as applicable.

Catholic Priest's Reference An application has been made fo (Child's Name)	r cy of the college clearly states t	that priority will be given				
The family is known to me	Yes No					
The family is known to me						
The child is known to me	Yes No					
Reference by Priests/Ministers of other denominations or faiths  Please   boxes as applicable.						
I confirm that (Child's Name) and his/her family are practising members of our faith community and attends:						
For all references:						
any further information in	support of this applicatio	n				
Signed:		Date: Name: Contact Number _ Parish/faith community Address				
Thank you for taking the time and this form for Secondary transfer. form and any certificates to the Cenvelope provided to arrive no la October 2022.	Please return the College in the					