

## St Benedict's Catholic School

**Supplementary Information Form** 

<u>IMPORTANT</u>: In accordance with the school's published Admissions Policy (available on the school website) you are strongly recommended to complete and return this form.

If you wish to apply for a place for your child at St Benedict's Catholic School please provide the following information. This is necessary to allow each applicant to be placed in the correct category in accordance with our published admissions policy. Failure to provide complete information will make it impossible for us to recognise the correct category for your child, and will lead to them being placed in a lower category.

For Year 7 September normal admission round, you must also complete the Local Authority form and submit it to the Local Authority. Parents of children attending or due to attend state schools should receive details of the admissions process from their own Local Authority. For admission at any other time to any year group, you must complete and submit an ADM1 form to us. This is available from the school or Local Authority

as part of the normal admission round I have completed an ADM1 application form	YES / NO YES / NO
Name of Child	
Date of Birth	
Name of Parent/Carer	
Home Address	
Telephone Number	
Present School	

(Please turn over)





1.	If Catholic please state:
Date o	of Baptism
Place /	Parish of Baptism
<u>Comm</u> subseq	e enclose a <u>copy of your child's Catholic Baptismal Certificate, or First Holy</u> nunion certificate. (Those who have been Baptised in other Christian communities and quently Received into the Catholic Church should enclose a copy of their First Holy nunion certificate).
2.	If your child is <b>due to be Baptised</b> into the Catholic Church, is <b>of another Christian denomination</b> or is of <b>another faith</b> , please provide a copy of any Baptismal certificate, or a letter of proof from a religious leader, as appropriate.
3.	If your child is the child of an employee at St Benedict's Catholic School please state name of the relevant parent/ carer
Name	of staff member

## **RETURNING THIS FORM**

Please return this form and any associated documentation to Admissions, St Benedict's Catholic School, Beetons Way, Bury St Edmunds, Suffolk, IP32 6RH or <a href="mailto:admissions@st-benedicts.suffolk.sch.uk">admissions@st-benedicts.suffolk.sch.uk</a>

