



GOOD SHEPHERD CATHOLIC PRIMARY & NURSERY SCHOOL

Dunley Drive, New Addington, Croydon CR0 0RG

Telephone: 01689 841771 – Fax: 01689 843341

SUPPLEMENTARY INFORMATION FORM – For Reception Places September 2017

Please refer to the Admissions Policy when completing this form

Information supplied may be used for registered purposes under the terms of the Data Protection Act 1984

PLEASE COMPLETE ALL THE SECTIONS ON THIS FORM

Child's Details:

Child's Surname: _____

Male / Female: _____

Christian Name: _____

Date of Birth: _____

Home Address: _____

Church of Baptism: _____

Date of Baptism: _____

(Evidence of baptism will be required or evidence of dedication.)

Post Code: _____

Home Phone No: _____

Parents / Carers Details:

Name(s) Mr/Mrs/Ms/Miss _____

Home Phone _____ Mobile: _____

Email: _____

(If your child has not been baptised then evidence of parent's/carers Baptismal Certificate will be required)

Siblings that will be attending Good Shepherd at the time of admission:

Name	Date of Birth
_____	_____
_____	_____
_____	_____

Siblings, means *natural brothers/sisters, adopted siblings, step brothers /sisters and foster brothers /sisters.*

Family Attendance at Church

Please arrange for your priest to tick and sign to confirm Mass attendance.

Present church attended by your family _____

Weekly []

Monthly []

Quarterly []

Yearly []

Priest's Name

Priest's Signature

Other Information:

Please add here any other information you may feel is relevant to this application in relation to the schools Admissions Policy in respect of exceptional Medical, Social or Pastoral needs of your child that make only this school suitable for them. Strong and relevant evidence must be provided by an appropriate professional authority (e.g. Qualified Medical Practitioner, Educational Welfare Office, Social Worker or Priest.)

If necessary please attach any relevant original documents to this form.

1. You **MUST** submit your Common Application Form (CAF) online to the Croydon Local Authority. This applies whether or not you are a resident in the borough of Croydon
2. You **MUST** submit your Supplementary Form to school together with the following:
 - **Copy of Child's Baptism**
 - **Priest's Reference (s)**
 - **Original Utility Bill (proof of residence)**

Parent(s)' Declaration:

*I am applying for admission of my / our child to **Good Shepherd Catholic Primary & Nursery School**.*

I understand that places will be allocated by the Governing Body in accordance with the school's published Admissions Criteria

I confirm the content of this application is true and accurate to the best of my knowledge and belief. I have read the Governor's Admission Policy (attached) and will notify the school of any changes in my circumstances.

Signature of parent/carers: _____

Print name _____

Date of application: _____

Have you completed ALL the sections on this form? Failure to do so may result in your child not being offered a place. Please return it to Good Shepherd Catholic Primary & Nursery School By the 15th January 2016.

For office Use only

- ☐ **Baptism Certificate**
- ☐ **Priest's Reference(s)**
- ☐ **Utility Bill**