



Botwell House Catholic Primary School

Supplementary Information Form for Admission to

RECEPTION 2019/2020

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Child's Details

Child's Surname:	First Names:
Home Address:	Date of Birth:
	Postcode:

Parent/Carer Details

Parent/Carer's Name	
Relationship to child	
Address:	Postcode:
Telephone Number(s)	
Alternative contact details	
Relationship to child	
Address:	Postcode:
Telephone Number(s)	

Details of Religion

Religion of child			
Catholic Parish in which you live in (full address)			
Church where your child was baptised & date of baptism			
Church you currently attend			
Name of Priest supplying Certificate of Catholic Practice or religious leader supplying letter confirming membership of the faith community (where appropriate)			
Name of brother or sisters at this school who will be attending at the date of admission	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; text-align: center;"><u>Name(s)</u></td> <td style="width: 50%; text-align: center;"><u>Year Group</u></td> </tr> </table>	<u>Name(s)</u>	<u>Year Group</u>
<u>Name(s)</u>	<u>Year Group</u>		

Does your child have exceptional medical, pastoral or social needs that can only be met by attendance at this school (Professional evidence will be required)	YES / NO (if yes please provide details)
Is your child 'looked after' by the Local Authority, adopted having previously been 'looked after' or subject to child arrangements or special guardianship orders?	YES / NO (if yes please provide details)
Member of staff at Botwell House School and has been employed at the school for at least 2 years at the time of application?	YES / NO (if yes please provide details)

I confirm that I have read and understood the Admissions Policy and that the information I have provided is correct. I understand that I must notify the school immediately if there is any change to these details and that should any information I have given prove to be inaccurate that the governors may withdraw any offer of a place even if the child has already started.

Parents/Carers Name.....

Signature..... **Date**.....

Please Note:

- Where applicable parents can obtain a Certificate of Catholic Practice from the parish in which the family normally worships or from the Diocese of Westminster website at www.rcdow.org.uk/Education.
- Applicants from other Christian denominations and other faiths may attach a letter from their minister or religious leader confirming membership of the faith community.
- You must complete the Local Authority eAdmissions form/online form and return by the closing date. If you do not do this you will not be offered a place.

Checklist:

- Have you enclosed:**
- Proof of Date of Birth
 - Baptism Certificate
 - Certificate of Catholic Practice dated within one year of admission
 - Evidence of exceptional need (where appropriate)
 - Proof of address (Current Council Tax Demand, Tenancy Agreement)

Have you completed your local authority's eAdmissions form/online form?