

**St Joseph’s Infant School Supplementary Information Form September 2024**

Please read the Admissions Policy and procedures before completing this form. If you would like help in completing this form or with translations of the questions please do not hesitate to contact the school office and this will be arranged.

If your child will be 4 years old by 31/08/2024 and you are seeking a place for him/her to join St Joseph’s Infant School in September 2024 then complete and sign this form 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 which should then be returned to the school. If you are not a Catholic, please hand the form to your minister or equivalent who will add his or her reference in Part 3. The completion of a Supplementary Information Form is not mandatory. However, if the form is not completed, the governing body of the school will only be able to consider the application after all applicants who have completed and returned a Supplementary Information Form. This may result in the application being ranked in a lower criterion.

All information given is strictly confidential and will only be seen by the Admissions Committee and your nominated Priest. In the event of an Appeal, it will be released to the Independent Appeal Panel.

***As of the 5th June 2022, Pentecost, the Bishops of England and Wales reinstated the obligation to attend Mass on Sundays and Holy Days. Parents applying for a place at the Federation of St Joseph's Junior, Infant and Nursery schools under a faith based criteria will need to complete a Supplementary Information Form. Evidence of practice will be measured by frequency of attendance at Mass as validated by either a priest or minister, as was the case prior to 18th March 2020. These arrangements apply to the admissions round for 2024 and subsequent rounds.***

***Closing Date: This form should be returned to the school no later than 15th January 2024***

Part One **PLEASE USE BLOCK CAPITALS**

# Child’s Details:

|  |  |
| --- | --- |
| Child’s Full Surname |  |
| Child’s First Name [s] |  |
| Male / Female |  |
| Date of Birth | DD/MM/YY |
| Home Address [this must be the address where the child normally lives] including postcode |  |
| Name of Borough |  |
| Religion |  |
| Date of Baptism(please attach copy ofBaptismal Certificate) | DD/MM/YY |
| Place and Parish of Baptism |  |

**Details of the Parent/ Carer/ Guardian signing the form**

|  |  |
| --- | --- |
| Full Name |  |
| Title Mr/Mrs/Ms etc |  |
| Address, including postcode |  |
| Telephone Number | Home: | Daytime: |
| Email address |  |
| Religion |  |
| Relationship to Child |  |

#### In the case of the application being made by a guardian/carer - proof of guardianship or care order must be given at the time of application.

**Siblings Details: Include ALL other brothers/sisters** [see Important Notes for details] of the child named above who are attending either St Joseph’s Infant or Junior Schools at the time of applicant’s admission.

|  |  |
| --- | --- |
| Child’s Full Name | Year group in Sept 2024 |
|  |  |
|  |  |
|  |  |

# Details of the Parish in which you live

|  |  |
| --- | --- |
| Name of the Parish |  |
| Name of Parish Priest |  |
| Address of Presbytery, including postcode & telephone number |  |
| Name and Address of the priest to whom you will take this form in order to provide verification in Part Two or your place of worship and name of the person who will be providing your verification of regular practice in Part Three. |  |
| How long have you lived in the Parish? |  |

**How often do the family attend Mass?** [Please **circle** which option is your usual pattern of Mass attendance – see Important Notes for Definitions]

|  |  |  |
| --- | --- | --- |
| Weekly | Intermittently | Never |

### How long has this been your usual practice?

#### Adult making the application years

**Please indicate the time of Mass at which the family usually attend [Saturday/Sunday - and time of Mass]**

Please attach any other information you may feel is relevant to this application in relation to the school’s 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, education welfare officer, social worker or priest).

**REMINDER** - Please make sure you bring the following with this form:

1. The **Baptismal Certificate** of the child applying *and*
2. A recent **Utility bill** (gas, electric, water) or **Bank Statement dated within the last 3 months** showing the main residence of the child applying *and if applicable* (please see the attached sheet for all information)

#### The Proof of Guardianship/Care Order

All originals must be brought to the school office. They will be copied and returned to you. All documents must be dated within three calendar months. **Photocopies are not acceptable.**

When you return the form in person you will be asked to sign the log book as proof of receipt by the school.

St Joseph’s Infant School, Crown Dale, Upper Norwood SE19 3NX. TEL: 020 8670 2385

**Common Application Form (CAF)**

Please ensure that you also complete the online **Common Application Form** for your home Local Authority, which should be completed online **before the closing date of 15 January 2024.**

**Please note only one parent is required to sign this Supplementary Information Form, we respectfully request that this should be the Catholic Parent.** If the child has a legal guardian, other than the parent, they should sign the form and provide written evidence to support this fact.

# Parent/Carer Declaration:

**I have read the admissions criteria for the school and understand that a place at the school is not guaranteed until I receive a written offer from the Governors.**

**I confirm that the information given on this Supplementary Information Form is correct and that I have not omitted any material information. I understand that false information or omission of material information may result in disqualification or even loss of a place after it has been offered, accepted or taken up.**

## Signed ……………………………………………………… [Parent/Guardian/Carer] Print ……………………………………………………… Date ……………………………. Relationship to child………………………………………….

Parish ………………………..….…

Print name ………………………………………………………..

Date …………………….…………

………………………………………………………..

Signed

………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………….

I am unable to verify that the information given is correct because …………………….

I verify that this child is baptised or is enrolled in Catechumenate

**☐**

**☐**

Part Two

**Verification by Parish Priest**

**To be completed by the nominated Priest, please tick all boxes which apply to this application, giving details if appropriate.**

* I verify that the Mass attendance information given on the Supplementary Information Form is correct.

Date: ……………………………………….

Signed: ………………………………………………………………

Telephone No: ………………………………………………………………………………………………………….

Address: …………………………………………………………………………………………………………………………………

Name of Parish or faith community: …………………………………………………………………………………….

Denomination/faith: ………………………………………………………………………………………………………….

Name of minister: ………………………………………………………………………………………………………….

Part Three

**To be completed only by ministers of other denominations or faiths.**

Non-Catholic parents/carers from other denominations or faiths should hand this form to their minister or equivalent asking them to complete the section below and return it as soon as possible to St Joseph’s Infant School.

* I confirm that this family are members of our faith community
* The family is not known to me

**THIS FORM SHOULD BE RETURNED TO THE INFANT SCHOOL OFFICE**

## St Joseph’s Infant School, Crown Dale, Upper Norwood SE19 3NX (TEL: 020 8670 2385)

THE CLOSING DATE is 15 JANUARY 2024

**PLEASE CHECK YOU HAVE INCLUDED THE FOLLOWING:**

* Parish Priest’s or Minister’s signed verification
* Baptism Certificate\*
* Utility Bill\* (gas, electric, water)

or Bank Statement\* (for proof of address **dated within 3 months**)

 and if applicable

* Proof of Guardianship or Care Order

\***ORIGINAL DOCUMENTS ONLY – COPIES WILL BE TAKEN IN SCHOOL AND THE ORIGINALS RETURNED TO YOU.**