CATHOLIC PRIMARY SCHOOLS IN THE PORTSMOUTH AREA ADMISSIONS 2016-2017 – SUPPLEMENTARY INFORMATION FORM Corpus Christi Catholic Primary School, St John's Cathedral Catholic Primary School, St Paul's Catholic Primary School, St Swithun's Catholic Primary School **Section 1 - Pupil information** All applicants to complete Child's surname: Child's first name: Parent's surname: Parent's first name: Address: Post Code: Section 2 – Tick the categories that apply All applicants to complete Tick the category if 'yes' 1. Baptised Catholic child who is Looked After or has previously been Looked After. If yes, complete Sections 3 and 6 if applicable. 2. Baptised Catholic child. If yes, you are asked to: (i) complete Section 3 if at least one of your preferred schools listed on the CAF is Corpus Christi, St John's or St Swithun's if applicable. (ii) All should complete Section 6 if applicable. 3. Child (not baptised Catholic) who is Looked After or has previously been Looked After. If yes, complete Section 6 if applicable. 4. Child (not baptised Catholic) of a baptised Catholic parent. If yes, you are asked to: (i) complete Section 3 if at least one of your preferred schools listed on the CAF is Corpus Christi, St John's or St Swithun's if applicable. (ii) All should complete Section 6 if applicable. 5. Sibling of a child already at a Catholic school who will still be attending the school in the school year 2016-17 If yes, complete Section 6. 6. Child who is a member of another Christian denomination. If yes, complete Section 4. 7. Children from another faith tradition. If yes, complete Section 4. 8. Child who does not fall into any of the above categories. Section 3 – Mass attendance (Note: For those who do not attend Tick Priest to the box confirm the Mass, membership of the Catholic Church is simply evidenced by a if 'yes' tick by initials baptismal certificate). or signature

a) I/we have attended Sunday Mass weekly in a Catholic community for the last year.				
b) I/we have attended Sunday Mass at least monthly in a Catholic community for the last year.				
c) I/we have attended Sunday Mass less than monthly in a Catholic community for the last year.				
Name of priest of main church of w	orship:			
Name and address of church:				
Signature of priest named above:		Date:		
Section 4 – Other Christian denomination or faith tradition		Tick the box if 'yes'		
a) I/we have been active members in our Christian/faith * community for the last year. <i>Delete Christian or faith as appropriate</i>				
b) I/we are member/s of a Christian/faith * community. Delete Christian or faith as appropriate				
Name of Christian or faith tradition				
Name of religious or faith leader of main church of worship:				
Name and address of church:				
Signature of religious/ faith leader named above:		Date:		
Section 6 – Siblings Give names of siblings attending any of the schools: Corpus Christi, St John's, St Paul's or St Swithun's only and their current year group.				
Name of Sibling	Name of Catholic school attending:		Current Year grou	ıp
Declaration I certify that the information given on this form is correct. I understand that any place offered will be withdrawn if I give false information, even if my child has started at a new school.				
Signature of parent/carer:				
Print name:		Date:		