CATHOLIC PRIMARY SCHOOLS IN THE PORTSMOUTH AREA **ADMISSIONS 2018-19 – 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 first name: Parent's surname: Address: Child's Date of Birth: 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. (i) complete Section 3 & 5 if applicable. Copy of Baptism Certificate must be attached. 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 5 if applicable. Copy of Baptism Certificate must be attached. 3. Child (not baptised Catholic) who is Looked After or has previously been Looked After. If yes, complete Section 5 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 5 if applicable. Copy of baptism Certificate must be attached. 5. Sibling of a child already at a Catholic school who will still be attending the school in the school year 2017-18. If yes, complete Section 5. 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.

	Note: For those who do not attend ic Church is simply evidenced by a	Tick the box if 'yes'	Priest to confirm the tick by initials 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 community for the last year.	at least monthly in a Catholic		
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	worship:		
Name and address of church:			
Signature of priest named above:		Date:	
Section 4 – Other Christian denomination or faith tradition		Tick the box if 'yes'	Religious/ faith leader to confirm the tick by initials or signature
a) I/we have been active members in our Christian/faith * community for the last year. Delete Christian or faith as appropriate			
b) I/we are member/s of a Christian/faith * community. Delete Christian or faith as appropriate			
Name of Christian or faith traditi	on		
Name of religious or faith leader of Name and address of church:	of main church of worship:		
Name and address of church.			
Signature of religious/ faith leader named above:		Date:	
Section 5 – Siblings Give names of St John's, St Paul's or St Swithun's	of siblings attending any of the schools: Of sonly and their current year group.	Corpus Chri	sti,
Name of Sibling	Name of Catholic school attending	: (Current Year group
Declaration I certify that the information given on the give false information, even if my child	nis form is correct. I understand that any place has started at a new school.	ce offered wi	ll be withdrawn if I
Signature of parent/carer:			
Name of parent/carer:	rer: Date:		