



# Holy Ghost Catholic Primary School

Nightingale Square, London, SW12 8QJ  
020 8673 3080

## Supplementary Application & Religious Inquiry Form Reception Class September 2018



In common with all Catholic primary schools in the Archdiocese of Southwark, applicants to Holy Ghost School must complete this supplementary application & religious inquiry form for return to the school by the deadline set by Wandsworth LA: **15<sup>th</sup> January 2018**. Please complete only Part 1 and Part 4. You will need to have Part 2 or 3 completed and signed by your Parish Priest or Minister. All information given will be confidential to those directly concerned with admissions at the school and your Parish Priest or Minister. This form is required in addition to the Common Application Form which must be submitted directly to Wandsworth LA. You are strongly advised to read the school's admissions policy carefully, before completing this form.

### PART ONE – To be completed by parent(s) or guardian(s) of all applicants

Surname of child: _____		Christian/Forename(s): _____	
Religion: _____		Date of Birth: _____	
Place of Baptism: _____		Date of Baptism: _____	
Mother's /Guardian's name: _____		Religion: _____	
Father's /Guardian's name: _____		Religion: _____	
Home address: _____ <i>This must be the address where the child normally lives</i>			
_____		Postcode: _____	
Contact number: _____		(Mother/Father/Guardian)	
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Contact email address: _____		(Mother/Father/Guardian)	
		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Borough in which you reside: _____ <i>(eg Wandsworth, Lambeth)</i>			
If Catholic, please indicate which Mass you normally attend (day & time): _____			
Parish in which you live: <i>(eg Holy Ghost, St Anselm's)</i> _____			
Parish where you worship: <i>(if different)</i> _____			
How long have you worshipped there? _____ years.		Applications will be ranked in order of regular, occasional and irregular worship. Priority will be given to those who have evidence of weekly worship. If less than 3 years worship at this parish, please provide evidence of worship from your previous parish priest with this application or, if you are unable to provide such evidence, a covering letter with reasons.	
How often do you attend Mass?		Regularly <i>(ie every Saturday evening or Sunday for a period of at least 3 years)</i>	<input type="checkbox"/>
		Occasionally <i>(ie twice a month, or those who are now practising regularly but cannot provide evidence of regular practice over a 3 year period)</i>	<input type="checkbox"/>
		Irregularly <i>(ie less than once a month)</i>	<input type="checkbox"/>
<b>Details of Siblings</b>			
If your child already has an older brother or sister attending Holy Ghost School, who will still be on the roll in September 2017, please give details:			
Name(s): _____			

Please add any other information that you may feel is relevant to this application in relation to the school's admissions policy in respect of an established medical need that may make only Holy Ghost school suitable for your child. Strong and relevant evidence must be provided by an appropriate authority (eg qualified medical practitioner or educational psychologist). Continue on a separate sheet if necessary.

**PART TWO – to be completed by the Parish Priest of the parish you normally attend.**

I am satisfied that the child is a baptised Roman Catholic, or has been received into Full Communion with the Roman Catholic Church, or is baptised into a Church that is in Full Communion with the Church of Rome. YES  NO

Is the family known to you? YES  NO

Please indicate which statement best describes the practice of the family:

**Regular attendance at Mass** (ie every Saturday evening or Sunday for a period of at least 3 years)

**Occasional attendance at Mass** (ie twice a month, or those who are now practising regularly but cannot provide evidence of regular practice over a 3 year period)

**Irregular attendance at Mass** (ie less than once a month)

**Unknown attendance at Mass**

How long has the parent(s) attended your church?

Can you verify the details regarding practice as stated by the family in Part 1 YES  NO

Please provide any explanatory or additional comments which may be helpful to the school in considering this application:

Name of Priest: \_\_\_\_\_ Name of Parish: \_\_\_\_\_  
(or Ethnic Chaplaincy)

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

**Parish Stamp or Seal**

Signature of Priest: \_\_\_\_\_

Date: \_\_\_\_\_

**PART THREE - to be completed by a Minister or equivalent Leader of Worship**

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

Name of the Minister/Leader: \_\_\_\_\_ Denomination/faith: \_\_\_\_\_

Parish or faith community: \_\_\_\_\_

Address: \_\_\_\_\_ Tel: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**PART FOUR – to be completed by parent(s) or guardian(s) of all applicants**

- I/we have received, read and understood the full details of the admissions' policy published in the school prospectus.
- I/we agree that the information on this form is true and accurate. I/we understand that any false or deliberately misleading information given on this form may render this application invalid, or lead to the offer of a place being withdrawn.

Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

I/we have also completed the 'Common Application Form' for my local authority (Wandsworth, Lambeth, Croydon) September 2018

Documents enclosed:      Baptismal Certificate

(Please tick boxes)      Current Financial Year's Council Tax Statement

Subject to determination by Adjudicator