



St. Francis Catholic Primary School

Friary Road, Peckham

London, SE15 1RQ

Headteacher: Miss E. Harris

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SUPPLEMENTARY INFORMATION FORM

NURSERY JANUARY 2024 INTAKE

CHILDREN BORN BETWEEN 01/09/20 – 31/12/2020

Please complete and sign the form below. If you are Catholic, hand it to your parish priest at the church at which you normally worship. He will add his reference in Part 2. 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. **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 St Francis R.C Primary School, 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 2023 and subsequent rounds.**

PART 1 (To be completed by parent/carers – PLEASE PRINT CLEARLY)

Surname of child _____

Christian name of child _____

Date of birth _____ Boy ☐ Girl ☐

Religion/Denomination: (eg Roman Catholic) _____

Date and place of Baptism (if applicable): _____

Parent/Carer's Name _____

Parent/Carer's Religion/denomination _____

Home address _____

Postcode _____

Contact telephone numbers: Mobile _____ Home _____ Work _____

Email address _____

If Catholic, indicate which Mass you normally attend: Saturday at _____ (time)
Sunday at _____ (time)

Parish in which you live _____

Usual Place of worship (if different) _____

How long have you worshipped there? _____ years. If you have recently moved to the parish please give details of your previous parish _____

How often do you attend Mass? ☐ weekly ☐ once or twice a month ☐ less often

I confirm that the information I have given on this form is accurate and truthful

Signed _____ Print _____ Parent/Carer
Date _____

Siblings: please complete this section if you have children already attending St Francis R.C Primary School.

I have children already attending St Francis YES NO (please circle)

Full name of child/ren:

Child 1 Name: _____ Class _____

Child 2 Name _____ Class _____

Child 3 Name: _____ Class _____

Part 2 (to be completed by Catholic priests only)

I am satisfied that the child is a baptised Roman Catholic or baptised member of a church that is in full communion with Rome. Yes ☐ No ☐

<u>PARENT/CARER</u>	<u>CHILD</u>
Are the parents known to you? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the child known to you? Yes <input type="checkbox"/> No <input type="checkbox"/>
Regular attendance at Mass <input type="checkbox"/> (i.e. weekly)	Regular attendance at Mass <input type="checkbox"/> (i.e. weekly)
Occasional attendance at Mass <input type="checkbox"/> (i.e. once or twice a month)	Occasional attendance at Mass <input type="checkbox"/> (i.e. once a month)
Irregular attendance at Mass <input type="checkbox"/> (i.e. less than once a month)	Irregular attendance at Mass <input type="checkbox"/> (i.e. less than once a month)
How long have the parent(s) attended your church? _____	How long has the child attended your church? _____

Please comment, if appropriate, only to clarify the Mass attendance above:

Priest's Name _____ Parish (or ethnic Chaplaincy): _____

Address _____ Tel: _____

Priest's signature _____ Parish stamp or seal

Date _____

Part 3 (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.

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

Name of Minister _____ Denomination/faith: _____

Parish of faith community: _____

Address: _____ Tel: _____

Signed: _____ Date _____

Part 4 Additional Information:

Is your child a "Looked After Child" are they, or have they ever been looked after by the state or local authority?

Yes or No ? _____ If yes, please give details below:

Is the child applying for a school place currently living in a private fostering arrangement?

Yes or No? _____ If yes, please give details below:

Does your child have any Special Educational Needs? Yes or No _____. Does your child have an EHCP Plan? Yes or No _____ if you have answered yes to the either of these questions, please give details below:

Part 5 (Parent/Carer)

I/we have read and understood the attached Admissions Policy for the school:

Parents Name _____ Signature _____ Date _____

Please return this form to the school office together with all documents listed below:

(1) Original baptismal certificate (2) Two proofs of address i.e recent council tax bill with at least one Parent/Carer's name Shown. (3) Utility bill and/or bank statement less than 3 months old. Without producing these documents, your application may be delayed. If your child is offered a place at this school, the ORIGINAL full birth certificate will also be required. Please note that the school can receive a greater number of applicants than there are places.

Part 6 (To be completed by the school office)

Documents Received:

2x Proof of address ☐

Child's Baptism Certificate ☐

Child's Full Birth Certificate ☐

Date Received _____ Received By _____ (Staff Member)