

Diocese of Westminster
Catholic Schools
Supplementary Information Form
Reception 2024 – 2025



Name and Address of School: Federation of St Mary's Priory Catholic Schools Hermitage Road, N15 5RE Nursery: a.m. p.m. Full time Infant School Junior School

Child's Details

Child's surname:	
Child's Christian or other first name:	
Home Address:	Date of Birth:
	Postcode:

Parent/Carer Details

Parent(s)/Carer(s) name:	
Address (if different from above):	
Telephone number:	
Alternative contact details:	
Name:	
Address:	
Telephone number:	
Email address:	

Details of Religion

Religion of child: (Please tick)	Catholic	Other Christian (name of denomination e.g Methodist)	Other faith
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Church where child was baptised and date of baptism: (baptism certificate required)					
Names of brothers or sisters at this school who will be on role in September 2024:	<table border="1"> <thead> <tr> <th>Name</th> <th>Class or Year Group</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	Name	Class or Year Group		
Name	Class or Year Group				
Is your child 'looked after' by the Local Authority, adopted or subject to a child arrangements or special guardianship order having previously been 'looked after'? (Please circle your response)	<table border="1"> <thead> <tr> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	YES	NO		
YES	NO				
<p>Has your child been adopted from overseas (also referred as IAPLAC)? YES / NO</p> <p>Please note - It may be necessary for the admission authority to request evidence of IAPLAC status from parents (if this is necessary to apply the oversubscription criteria).</p> <p>Has a local authority previously had any involvement with this child? YES / NO</p> <p>Has a Virtual School Head previously had any involvement with this child? YES / NO</p>					

Does your child have exceptional medical, pastoral or social needs that can only be met by attendance at this school? Please circle. (Professional evidence will be required.)				
<table border="1"> <thead> <tr> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	YES	NO		
YES	NO			

I confirm that I have read and understood the Admissions Policy and that the information I have provided is correct. I understand that I must notify the school immediately if there is any change to these details and that should any information I have given prove to be inaccurate that the governors may withdraw any offer of a place even if the child has already started school.

Signed..... Date.....

Please note:

- Applicants from other Christian denominations and other faiths may attach either a certificate of baptism or a letter from their minister or religious leader, confirming membership of that faith community.
- You **must** complete your local authority's online Application Form by the closing date. If you do not do this you will not be offered a place.

Checklist:

Have you enclosed? Birth Certificate
 Evidence of exceptional need (where appropriate)

ST MARY'S PRIORY CATHOLIC INFANT SCHOOL

Hermitage Road, Tottenham, London N15 3HD

Tel No: 020 8800 9305

email: admin@stmarysrcpory.haringey.sch.uk

Headteacher: Mrs Jane Ronan

RECEIPT - APPLYING FOR A RECEPTION CLASS PLACE IN SEPTEMBER 2024

Thank you for requesting a Supplementary Information Form (SIF) for a place at our school.

When returning the completed Supplementary Information Form (SIF) to the school office, please tick to indicate that you have enclosed all the following documentation:

1. Original Baptism Certificate,
2. Applicants from other faiths should attach a letter from their minister or religious leader confirming membership of their faith community.
3. Have you enclosed evidence of exceptional need, if applicable?
4. Have you completed your local authority's online application form?

Please note: The address on the Supplementary Information Form for the child must be the address at which the child normally lives. An address of a relative or a temporary address will not be accepted.

<p><u>CLOSING DATE FOR RECEIPT OF APPLICATIONS AT ST. MARY'S PRIORY IS 15th</u> <u>JANUARY 2024</u></p>
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Signature: _____ Date: _____

Print Name: _____

FOR ST. MARY'S SCHOOL OFFICE USE ONLY

Date received at St Mary's School: _____ Signed: _____

Documentation checked: YES / NO _____ Complete: YES / NO _____

Outstanding documentation: YES / NO _____ Receipt copied to parent: YES / NO

Date notified LA of this request (within two school days of request)

Date _____ By whom? _____

Notification of outcome to:

a) The LA (within two school days)

Date: _____ By whom? _____

b) Applicant's Parents/Guardians of the outcome of the application (within 10 school days):

Date: _____ By whom? _____