



# Application for Admission – PRIMARY SCHOOL Supplementary Form

1. Child's Surname \_\_\_\_\_ First Name \_\_\_\_\_

Middle Names (s) \_\_\_\_\_

2. Child's Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

3. Date of Birth \_\_\_\_\_ MALE / FEMALE

<b>Office Use:</b>
Date Received: _____
Year Group Required: _____
Admission Date Required: _____

**IMPORTANT: Please attach a copy of the child's birth certificate.**

4. Current School / Nursery / Pre-school etc. \_\_\_\_\_

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

5. Has the Child been Baptised Roman Catholic. YES / NO

**If YES, please attach a copy of the baptism certificate.**

6. Current Parish (if Roman Catholic) \_\_\_\_\_

7. Admission Date Required \_\_\_\_\_

8. Contact Name (Mr / Mrs / Miss / Ms / Other \_\_\_\_\_)

9. Relationship to Child \_\_\_\_\_

10. I have parental responsibility for the child named above YES / NO

11. Address (if different from 2. above) \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

12. Contact Tel. Number (Day) \_\_\_\_\_ (Eve) \_\_\_\_\_

13. Will the child have any brothers / sisters in the school on the admission date required. YES / NO

14. If YES, name of youngest: \_\_\_\_\_ Date of Birth \_\_\_\_\_

15. Signed.....Date.....

16. Please provide any additional information overleaf in support of your application.