



SUPPLEMENTARY INFORMATION FORM FOR BUCKINGHAMSHIRE CATHOLIC SCHOOLS

Part A – School Selection

- St Edward's St Joseph's Infants St Joseph's Primary
 St Louis St Michael's High Wycombe St Peter's
- Nursery Infant Junior Primary Secondary In Year

Year for September Entry _____

In Year Applications **ONLY** – academic year required _____

Part B – Child Details

Name of Child _____ Date of Birth _____ Gender M / F

Name of Parent/Guardian _____

Normal Home Address _____

_____ Postcode: _____

Telephone Number _____ Email Address: _____

Name of any siblings attending school applied for: _____

Christian Denomination: _____ Other religious faith/practice: _____

Church/Place of regular worship _____

Is your child baptised? Yes No

If yes a copy of the baptismal certificate **MUST** accompany this form

Part C – Priest/Minister of Religion Supporting Information

Declaration - I support the application made by this family.

Signed: _____ Print Name: _____

Date: _____

(Parish seal to be applied over the priest/minister's signature where applicable)

Part D – Parental Signature

Name of Parent/Guardian _____ Signed: _____

Date: _____

Please see your chosen school's website for information on their admissions policy

ADDITIONAL INFORMATION

Supplementary Forms must be received by your chosen school by the closing date for Admission applications as published by Buckinghamshire Council.

Nursery Applications

By signing the form you agree to the following:

- You will provide a packed lunch when your child is staying the full day
- It is your responsibility to check your eligibility for the 30 hours extended provision by the agreed dates as set by HMRC.

Please tick the relevant box for the provision required:

15 hours (morning session to 11.45 am)

30 hours (all day to 2.45 pm)

Extended Provision Code

Date obtained

NI Number
