

# St Mary's Catholic Primary Schools Trust



#### ST MARY'S CATHOLIC JUNIOR SCHOOL, SYDENHAM ROAD, CROYDON, CR0 2EW Cover Sheet 2024-2025

If any of the information given on this form changes before you are notified of the outcome of the application, you **must** inform the Admissions Committee IN WRITING immediately. Failure to do so may prejudice the application.

If you would like help in completing this form or with translations of the questions please do not hesitate to contact the school office and this will be arranged.

All information given is strictly confidential and will only be seen by the Admissions Committee and your nominated Priest. In the event of an appeal it will be released to the independent appeal panel.

### This application form must be returned to the School by **<u>1 pm on 12<sup>th</sup> January 2024</u>**

## PLEASE USE BLOCK CAPITALS

Child's Surname	
Child's First Name(s)	
Male/ Female	
Date of Birth	
Home Address (this must be the address where the child normally lives) Including Postcode	
Name of Borough	

### **Applicants Details**

Date form received			
(office use only)			

### FOR OFFICE USE ONLY

Original Baptismal Certificate / Copy of Baptism Certificate certified by Priest/ Proof of reception into the Catholic Church by a Catholic Priest (certificate)
Recent Utility Bill or Proof of Address (dated within the last three months)
Proof of Guardianship /Carer





# ST MARY'S CATHOLIC JUNIOR SCHOOL, SYDENHAM ROAD, CROYDON, CR0 2EW Supplementary Information Form

This is a form of application, and admission is subject to the Governors' decision and to the availability of places at the appropriate time. Information supplied may be used for registered purposes under the terms of the Data Protection Act 1984.

Please complete and sign the form below and, if you are Catholic, hand it to your parish priest or the 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.

### Note: Parents must complete A Common Application Form through their own council website. <u>The website for Croydon Council is www.croydon.gov.uk/admissions. Parents who do not have access to the internet can fill a</u> <u>paper CAF by contacting Croydon council on 020 8726 6400 and should return the form to the LA.</u>

### **PART 1** (To be completed by all parents or carers)

Surname of child:	Date of birth:		
Christian/forename(s) of child:			
Religion/Denomination: (eg Roman Catholic)		Boy 🗆	Girl 🗌
Date and place of Baptism (if applicable):			
Name of school the child is currently attending:			
Parents' names:			
Parents' religions/denominations:			
Home address:			
	Postcode		
Contact telephone numbers:		(Mother/F	ather/Carer)
E-mail address / es:			
Details of all other brothers / sisters of the child named above who entry:	are attending St. Mary's Catholic Junior	r School at the	time of
Full Name:	_ Year Group		
Full Name:	_ Year Group		
Full Name:	Year Group in September 2016		

Name of School applicant is currently attending:		
Address of School:		
	_ Telephone Number:	
Date attended from:		
of your previous parish		
How often do you attend Mass?  □ weekly	□ once or twice a month	□ less often

Please add here any other information you may feel is relevant to this application in relation to the school's admissions policy in respect of exceptional medical, social or pastoral needs of your child that make only this school suitable for them. Strong and relevant evidence must be provided by an appropriate professional authority (eg qualified medical practitioner, education welfare officer, social worker or priest).			
(Continue on a separate sheet if necessary)			

I/we confirm that the information we have given on this form is accurate and truthful and also confirm that I/we have read and understood the Admission Criteria.

Signed: \_\_\_\_\_ Parent/carer

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

# **PART 2** (To be completed by Catholic priests only)

For schools requiring evidence of practice:

PARENT/CARER			CHILD
Are the parents known to you?	Yes 🗆	No 🗆	Is the child known to you? Yes $\Box$ No $\Box$
Regular attendance at Mass (i.e. weekly)			Regular attendance at Mass (i.e. weekly)
Occasional attendance at Mass (i.e. once or twice a month)			Occasional attendance at Mass (i.e. once or twice a month)
Irregular attendance at Mass (i.e. less than once a month)			Irregular attendance at Mass (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.:
	Parish stamp or seal
Priest's signature:	
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 or faith community:			
Address:			
Tel.:			
Signed:	Date:		

General Data Protection Regulation: The school is registered for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the Local Authority, the Diocese and with the DFE. Further details can be found on our Privacy Notice on the website or via the school office.