

**St Benedict’s Catholic High School**

Supplementary Information Form

**IMPORTANT:** In accordance with the school’s published Admissions Policy (available on the school website) you are strongly recommended to complete and return this form.

If you wish to apply for a place for your child at St Benedict’s Catholic High School please provide the following information. This is necessary to allow each applicant to be placed in the correct category in accordance with our published admissions policy. Failure to provide complete information will make it impossible for us to recognise the correct category for your child, and will lead to their being placed in a lower category.

*It is* ***essential*** *that you also complete the ADM1 form and return it to the School.*

I have completed my own ADM1 application form YES / NO

Does your child have Education, Health and Care Plan? YES / NO

Is your child / has your child been in the care of the Local Authority (also known as “looked after”)? YES / NO

Name of Child . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

Date of Birth . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

Name of Parent/Carer. . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

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(Please turn over)

Home Address . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

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Telephone Number . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

Present School . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

1. If **Catholic** please state:

Date of Baptism . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

Place / Parish of Baptism . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

***Please enclose a copy of your child’s Catholic Baptismal Certificate, or First Holy Communion certificate.*** *(Those who have been Baptised in other Christian communities and subsequently Received into the Catholic Church should enclose a copy of their First Holy Communion certificate).*

1. If your child is **due to be Baptised** into the Catholic Church, is **of another Christian denomination** or is of **another faith**, please provide a copy of any Baptismal certificate, or a letter of proof from a religious leader, as appropriate.
2. Does your child have any older brothers or sisters who will be attending St Benedict’s Catholic High School in September 2021? Yes / No

If so please give their name(s) and date(s) of birth: . . . . . . . . . . . . . . . . . . . . . . . . . . . . .

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**RETURNING THIS FORM**

Please return this form and any associated documentation to St Benedict’s Catholic School, Beetons Way, Bury St Edmunds, Suffolk, IP32 6RH