

**Diocese of Westminster  
Catholic Primary Schools  
Supplementary Information Form  
2024 – 2025**



**Name and Address of School:**

**Child's Details**

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

**Parent/Carer Details**

Parent's name:	
Address (if different from above):	
Telephone number:	

**Details of Religion**

Religion of child: (Please tick)	Catholic	Other Christian (name of denomination )	Other faith
Catholic Parish you live in:			
Church where child was baptised and date of baptism: (baptism certificate required)			
Name and position of priest supplying Certificate of Catholic Practice (where appropriate)			

**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 governors may withdraw any offer of a place even if the child has already started school.**

Signed.....

Date.....

Please note:

- Where applicable parents can obtain a Certificate of Catholic Practice from the parish where they worship or from the Diocese of Westminster website.
- Applicants from other Christian denominations and other faiths may attach a letter from their minister or religious leader, confirming membership of that faith community.
- You **must** complete your local authority's application form online (or on paper) by the closing date. If you do not do this you will not be offered a place.

Does your child have a sibling already at the school    Yes/No

Name of child ..... Class .....

**Checklist:**

Have you enclosed:

Original Baptism certificate (where necessary)

Original Certificate of Catholic Practice (where  
necessary)

**Have you completed** your local authority's online application form?