

Supplementary Information Form for Reception Year Admission in Sept 2020

To be completed for all applicants applying for a faith based place. Must be returned to the school by

Monday 13th January 2020

Section A: About you and your child

For office use only

Follow-up actions and dates:

Full name of child			
Date of birth (DD/MM/YYYY) (between 01.09.15 - 31.08.16)	Name of parent or guardian		
Home address		Post code	

Section B: Confirmation that a Sikh applicant/parent/guardian is/are Amritahari or the applicant is Keshahari.

(Please confirm which of the following statements is correct by circling Y or N (Y=Yes; N=No), and providing the date and

Confirmation to be made by an authorised signatory of a Gurudwara or a Sikh religious body.

Name	Signature		Official stamp of Gurdwara/Organisation	
Position	Name of Gurudwara			
Address	Post code	Tel	Date:	
tion C: Confirmation th	at the applicant/parent/guard	lian of anothe	er religion is/are baptised (or	
	ed into that religion).			
	e following statements is correct by cir		lace of worship or religious body. Yes; N=No), and providing the date,	
/ N I confirm that the child	and parent/guardian named above are k			
// NI Laanfinna shasashaa			I	
	ant (and/or parent or guardian) named			
he (name of religion/faith)	on (date)	at (name of	Church/place of worship/religious event	
he (name of religion/faith)		at (name of	Church/place of worship/religious event	
che (name of religion/faith) Copies of baptism certificates	on (date)	at (name of	Church/place of worship/religious event	
Copies of baptism certificates	or similar evidence may be submitted <u>ir</u>	at (name of	Church/place of worship/religious event	
Copies of baptism certificates	or similar evidence may be submitted <u>ir</u>	at (name of	Church/place of worship/religious event	
Copies of baptism certificates Name Position	or similar evidence may be submitted <u>ir</u> Signature Place of	at (name of	Church/place of worship/religious event	
he (name of religion/faith) Copies of baptism certificates Name Position Address	or similar evidence may be submitted <u>ir</u> Signature Place of worship Post code	at (name of	Church/place of worship/religious event completing this form. Official stamp of place of worshi	
he (name of religion/faith) Copies of baptism certificates Name Position Address Ction D: Confirmations I	or similar evidence may be submitted in Signature Place of worship Post code py parent or guardian.	at (name of	Church/place of worship/religious event) completing this form. Official stamp of place of worship	
he (name of religion/faith) Copies of baptism certificates Name Position Address Ction D: Confirmations I	or similar evidence may be submitted in Signature Place of worship Post code Dy parent or guardian. of the following statements.	at (name of n addition to fully	Church/place of worship/religious event) completing this form. Official stamp of place of worship	
Copies of baptism certificates Name Position Address Clion D: Confirmations I Please read and confirm each of I. I confirm that the information. I understand that any inter	or similar evidence may be submitted in Signature Place of worship Post code py parent or guardian.	at (name of n addition to fully	Church/place of worship/religious event) completing this form. Official stamp of place of worship Date:	
the (name of religion/faith) Copies of baptism certificates Name Position Address Ction D: Confirmations I Please read and confirm each of the confirm that the information I understand that any inter-	or similar evidence may be submitted in Signature Place of worship Post code Dy parent or guardian. of the following statements. tion given in this form is accurate and trationally misleading or fraudulent inform on and withdrawal of any place offered.	at (name of n addition to fully	Church/place of worship/religious event) completing this form. Official stamp of place of worship Date:	

Date received: