

## Supplementary Information Form for Reception Year Admission in Sept 2024

To be completed for all applicants applying for a faith-based place. Must be returned to the school by 15th January 2023. Please go to your place of worship and complete the information below. Once completed and stamped, please send via email to admissions.npsw@nishkamschools.org and add the Year group and "Supplementary Information Form" to the subject box by 15th January 2023. Please ensure all statements are circled correctly and all sections are filled in otherwise the SIF maybe rejected. Any issues please email admissions.npsw@nishkamschools.org

## Section A: About you and your child

Full name of child			
Date of birth (DD/MM/YYYY)	Name of parent or guardian		
Home address		Post code	
Email Address		Phone Number	

Section B: FOR SIKHS ONLY Confirmation that a Sikh child/parent/guardian is/are Amritdhari or child

is Keshdho	ari.				
	ation to be made by an authorised be Yes or No to all three statements and fill in o		a Gurudwai	a or a Sikh re	ligious body.
initia	/ No I confirm that the child named at tion at the Gurdwara held on (date) wara/Jatha/Dharmic event).				•
<ol> <li>Yes / No I confirm that the parent/guardian named above was initiated as a Khalsa with Khanda-di-Pahul during the Amrit Sanchar initiation held on (date)</li></ol>					
Name		Signature			Official stamp of Gurudwara
Position		Name of Gurudwara			
Address		Post code		Tel	
					Date:
Saction C	FOR NON CIVES ONLY CO.	nfirmation t	hat the apr	licant/paren	t/guardian of another

Section C: FOR NON-SIKHS ONLY Confirmation that the applicant/parent/guardian of another religion is/are baptised (or formally initiated) into that religion.

	n to be made by an authorised sor No to both statements and fill in all the		an appropr	iate place of worsh	ip or religious body.
Yes / No I co (or formally in	nfirm that the child and parent/gua nfirm that the applicant (and/or pa itiated) into the (name of religion/ ous event)	rent or guardia faith)	n) named abo	ve was/were are bapt	
Copies of baptism certificates or similar evidence may be submitted in addition to fully completing this form.					
Name		Signature			Official stamp of place of worship
Position		Place of worship			
Address		Post code		Tel	Date:
Section D. C	Confirmations by parent or	guardian			

Please sign below to confirm that the following statements are true.					
<ol> <li>I confirm that the information given in this form is accurate and true.</li> <li>I understand that any intentionally mispleading or fraudulent information provided about me or my child may result in the invalidation of my application and withdrawal of any place offered.</li> </ol>					
Name	Signed				
Relationship to child	Date				