

Supplementary Information Form for Admission in year

To be completed for all applicants applying for a faith-based place. Please go to your place of worship and complete the information below. Once completed and stamped, please send via email to primaryadmissions.nswl@nishkamschools.org or secondaryadmissions.nswl@nishkamschools.org and add the Year group and "Supplementary Information Form" to the subject box. Please ensure all statements are circled correctly and all sections are filled in otherwise the SIF maybe rejected. Any issues please email <u>primaryadmissions.nswl@nishkamschools.org</u> or <u>secondaryadmissions.nswl@nishkamschools.org</u> or <u>secondaryadmissions.nswl@nishkamschools.org</u>

Section A: About you and your child

Full name of child		
Date of birth (DD/MM/YYYY)	Name of parent or guardian	
Application for year		
group:		
Home address	Ро	st code
Email Address	Phon	e Number

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

Confirmation to be made by an authorised signatory of a Gurudwara or a Sikh religious body. (Please circle Yes or No to all three statements and fill in all the details)

- 3. Yes / No I confirm that the child named above is Keshadhari (has uncut hair).

Name	Signature		Official stamp of Gurudwara
Position	Name of Gurudwara		
Address	Post code	Tel	
			Date:

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

	to be made by an authorised or No to both statements and fill in all th		an appropri	iate place of worsh	ip or religious body.
Yes / No I conf (or formally initi	îrm that the child and parent/gua îrm that the applicant (and/or pa iated) into the (name of religion/f is event)	rent or guardia faith)	n) named abo	ve was/were are bap	
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: Confirmations by parent or guardian.

Please sign below to confirm that the following statements are true.

1. I confirm that the information given in this form is accurate and true.

2. 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.

Name	Signed	
Relationship to child	Date	

NB No further evidence is needed if this form is properly completed. Any additional evidence, such as a letter from a Gurudwara, place of worship, or religious body will only be considered if it addresses the School's admissions criteria, other factors cannot be considered.