

Supplementary Information Form for Admission in 2019 - 2020 To be completed only for applicants applying for a faith based place

Section A: About you and your child

Name of parent or guardian							
Full name of child						Date of birth	
Application for year: (Please tick)	Reception Year		Year 7		Other Year (please specify)		
Home address						Post code	

						⊥'			
Но	ome address							Post c	:ode
Section B:	Confirmat	lion tha	at a Sikh chik	d/par	rent/guardia	ın is/	are Amrit	dhari or	child is Keshdhari.
(Please co location of 1. Y/N held of 2. Y/N Sanch	nfirm which of the initiation of the initiation of the initiation of the initiation has ar initiation h	of the folin). at the chil at . at the parelled on (da	ild named above rent/guardian nar	was in med ab	nitiated as a Khal Name Oove was initiate	ling Y of lsa with e of orged as a	or N (Y=Yes; th Khanda-di- ganising Gurdw a Khalsa with (Name of o	; N=No), a -Pahul durir wara/Jatha/D n Khanda-di	and providing the date and and the Amrit Sanchar initiation
Name				Signat	ture				Official stamp of Gurdwara
Position				Name Gurd	e of				
Address				Post o	code		Tel		
									Date:
(Please coreligion and Y / N I core Y / N I core the (name)	tion to be nonfirm which d location on firm that the of religion/fair	of the for of the inition the inition child and applicant th)	ollowing stateme ation). d parent/guardiar t (and/or parent	ed sigr ents is n name or gua	natory of an a correct by circ ed above are kno ardian) named al	own to	or N (Y=Yes o me. was/were are	s; N=No), c	rship or religious body. and providing the date, (or formally initiated) into e of worship/religious event)
			similar evidence			<u>additic</u>	on to fully co	mpleting t	this form.
Name				Signat	ure				Official stamp of place of worship
Position				Place worsh	. • •				
Address				Post o	code		Tel		<u>Date:</u>
Section D	: Confirmo	ıtions b	y parent or g	guard	lian.				
Please re	ad and cor	nfirm ea	ich of the follo	wing	statements.				
2. I under	stand that an	y intentio	n given in this for onally mispleading and withdrawal	g or fra	audulent informa		orovided abo	out me or r	my child may result in the
Name							Signature		
Relationshi	D to child					,	Date		

2, parent of general and							
Please read and confirm each of the following statements.							
 I confirm that the information given in this form is accurate and true. 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		Signature					
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.

For office use only	Date received:
Follow-up actions and dates:	