

Newman Catholic College

Diocese of Westminster - Supplementary Information Form 2019/20



A) Student Details

Surname:	Home Address: House Number/Building Name: Road: Borough: Postcode:
First Name:	
Date of Birth: (DD/MM/YYYY) ___/___/___	
Age at time of application:	
Gender: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Length of time at current address:	

B) Parent/Carer Details

1) Name:	2) Name:
Relationship to the above:	Relationship to the above:
Do you live with the above student? Yes <input type="checkbox"/> No <input type="checkbox"/>	Do you live with the above student? Yes <input type="checkbox"/> No <input type="checkbox"/>
Address (if different to above)	Address (if different to above)
Mobile number:	Mobile number:
Landline number:	Landline number:
Email address:	Email address:
3) {Other emergency contact details} Name:	
Relationship to the above:	
Mobile number:	
Landline number:	
Email address:	
Is this child looked after (i.e. fostered or in Local Authority care)? Yes <input type="checkbox"/> No <input type="checkbox"/>	

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Check student Age – Year Group _____

Ethnic Background Form included

Birth Certificate copy included

Proof of address copy included

OFFICE USE ONLY - Interview Notes:

Home Circumstances

If Yes, which borough is responsible? _____		
Other care arrangements? Is this child adopted, subject to a residence or special guardianship order, or part of a private fostering agreement? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, please add details:		
Is this child a refugee or asylum seeker? Yes <input type="checkbox"/> No <input type="checkbox"/> Details:		
Family details: Does the above student have any other siblings? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please complete details below:		
NAME:	AGE:	SCHOOL:

C) Religious Details

Religion of Student: (please indicate)		
Catholic <input type="checkbox"/>	Other Christian <input type="checkbox"/>	Other faith (name): _____
If Catholic: Name of Parish:		
If Catholic: Name of Parish Priest:		
If Catholic: Name of Parish where the above student was baptised (please supply copy of certificate):		

D) Nationality Details

Nationality: British <input type="checkbox"/> Other <input type="checkbox"/> (name below): _____	First Language: English <input type="checkbox"/> Other <input type="checkbox"/> (name below): _____
If not British, date arrived in UK (DD/MM/YYYY): ___/___/_____	Other Languages spoken: _____

Current Residential Status:

OFFICE USE ONLY Priest Catholic form included <input type="checkbox"/>	OFFICE USE ONLY - Interview Notes: Family circumstances:
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- British citizen
- EU National
- UK Visa

* Please include any documentation of residential status

E) Educational Details

Special Educational Needs & Disabilities

Does this student have any Special Educational Needs? Yes No

If yes, please add details:

Has your child been in continuous education since the age of 5? Yes No

If no, please account for any gaps in education below.

Chronology of past schooling (Primary and Secondary):

Please account for any gaps in education.

Name and address of institutions	Dates attended	Attendance %	Recent Results
Primary Education:			
Secondary Education:			

* Please supply school reports and attendance records for the past two years

Behaviour Record: Has the above pupil been excluded or permanently excluded from any previous school?

Yes No If yes, please add details:

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- School reports from past 2 years
- Attendance reports from past 2 years
- Copy of ID & passport
- Copy visa/UK residents permit

OFFICE USE ONLY - Interview Notes:

- School History
- Suggested Interventions

F) Medical Details

Does this student have any known medical needs or allergies? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please add details:	
Name of Doctor:	Name of Surgery:
Address of Surgery:	Surgery Telephone Number:

G) Travel to School

Please state which method of transport this student will use to get to school:

Car: Bus: Cycle (with Helmet only): Walk: Other: _____

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

Parent/Carer 1 Signed..... Date.....

Parent/Carer 2 Signed..... Date.....

Please note:

- Where applicable parents can obtain a Certificate of Catholic Practice from the Parish where the family normally worships or from the Diocese of Westminster website at www.rcdow.org.uk (follow "For Parents")
- Applicants from other Christian denominations and other faiths may attach a letter from their minister or religious leader confirming membership of the faith community.
- You **must** complete your local authority's Common Application Form and return it to the council offices by the closing date. If you do not do this you will not be offered a place.

Have you enclosed?

1. Copy of baptism certificate (where necessary)
2. Priest's Reference Form (where necessary)
3. Evidence of exceptional need (where appropriate)

Have you completed your local authority's Common Application form?

OFFICE USE ONLY - Checklist

NOTES:

Catering Form

Data Protection form

School Trips form

School ethos

Pupil, Parental, School agreement form