

ELLESMERE PORT CATHOLIC HIGH SCHOOL

Supplementary Information Form

Confidential

Please complete both sides in CAPITALS and return to the School

Please note: This is not an ADMISSIONS FORM. You will have to make a formal application via the local authority: via Cheshire West and Chester.

You can do this on-line: www.cheshirewestandchester.gov.uk/admissions

or via a paper application in their Admissions Booklet.

Child's Surname:	
Child's Forename(s):	
Child's Date of Birth:	
Gender:	Male/Female* (delete as appropriate)
Child's Address:	
	Postcode:
Home Telephone Number:	
Parental Contact Name:	
	Relationship:
Address:	
- 1 1 2 2	Postcode:
Telephone Number:	
Email Address:	
Parental Contact Name:	
Parental Contact Name:	
	Relationship:
Address:	Neiduonship.
Address.	
	Postcode:
Telephone Number:	
Email Address:	
Is the child baptised Roman Catholic?	Yes/No
•	
You are asked to enclose a copy of the	Date of Baptism:
baptismal certificate with this form or evidence	
of formal reception into the Roman Catholic Church. If this is not possible explain below.	Church:
	Location (Town/City):
	Certificate enclosed: Yes/No

Name and Address of Current School:	
	Postcode:
Names of any siblings currently attending the School or who have previously attended: A sibling means the brother, sister, stepbrother or stepsister, half brother or half sister living together as part of one household.	Name(s): Year Group(s) as at September 2016: If previously attended, dates attended the school
	From: To:
Children of staff employed by the school, or who have been employed for two or more years, or who have been recruited to meet a particular skills shortage.	Name of Staff: Date employment started:
Additional Information which you may wish to supply:	
Signature	
Relationship to Child:	Date:

CLOSING DATE FOR RECEIPT OF INFORMATION BY: 31 October 2016

Office Use Only

Baptismal Certificate Seen: Yes/No Signature: Date:







