

THE CATHOLIC HIGH SCHOOL CHESTER

A Specialist Science College

'Committed to providing the best Catholic education for all'

ADDITIONAL INFORMATION TO SUPPORT APPLICATION FOR ENTRY FOR SCHOOL YEAR Starting: September 2017

SURNAME:

STUDENT'S CHRISTIAN NAMES:.....

STUDENT'S DATE OF BIRTH:/...../.....

ADDRESS:

.....

..... POST CODE:

HOME TELEPHONE NUMBER:

WORK TELEPHONE NUMBER(S):

(FATHER)

(MOTHER)

RELIGION: It is very important to provide the following information as it could have a significant impact on your application

If your child is Roman Catholic please:

- Supply a copy or original baptismal certificate/proof of baptism
- state in which Parish you live
- state whether your child has made his/her First Communion? YES / NO

If your child is not a baptised Roman Catholic please state here your reasons for choosing this Catholic school for his / her education and provide a letter of support from your local minister or copy of baptismal certificate.

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NAMES OF ANY BROTHERS/SISTERS PRESENTLY ATTENDING THE CATHOLIC HIGH SCHOOL, CHESTER:

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WE/I recognise and support the spiritual, academic and pastoral aims of the school as outlined in the school prospectus.

SIGNED.....Parent/Guardian

**COMPLETION OF THIS FORM DOES NOT CONFIRM A PLACE AT THE CATHOLIC HIGH SCHOOL,
CHESTER**

PLEASE COMPLETE AND RETURN BY 31 OCTOBER 2016