

EXTERNAL APPLICANTS ONLY

FAITH DECLARATION - TO BE COMPLETED BY THE PARENT/CARER

If your child is a member of the Catholic Church, other Christian denomination or faith, please complete Part A, Part B or Part C below as appropriate.
If neither applies to your child, please go straight to Part 5 on this form.

A. For applicants applying for a Catholic child, please complete the following:

I confirm the child is a member of the Catholic Church	YES	
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Date and place of baptism (or Reception into Church if applicable) including address	
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Name and address of the current parish/es you are registered under:

B. For applicants applying for a child of another Christian denomination please complete the following:

I confirm the child is a member of another Christian denomination	YES	
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Which denomination?	
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Date and place of baptism/dedication (if applicable) including address	
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Name and address of the current parish/es you are registered under:

C. For applicants applying for a child of another faith please complete the following:

I confirm the child is a member of another faith	YES	
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Which faith?	
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Date and place of baptism/dedication (if applicable) including address	
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Name and address of the current designated places of worship you are registered under:

NEXT STEP:

PART 2 TO BE COMPLETED BY CATHOLIC PRIESTS

PART 3 TO BE COMPLETED BY OTHER CHRISTIAN DENOMINATIONS

PART 4 TO BE COMPLETED BY OTHER FAITHS AND MINISTERS/FAITH LEADERS

PART 5 TO BE COMPLETED BY PARENTS AND CARERS

PART 2 - TO BE COMPLETED BY CATHOLIC PRIESTS ONLY

I am satisfied that the child is a baptised Catholic/has been received into the Church Yes No

Signature of Priest: _____

Parish Stamp/Seal:



NAME IN BLOCK CAPITALS: _____

Date: DD/MM/YYYY

Parish (or ethnic chaplaincy): _____

PART 3 - TO BE COMPLETED BY MINISTERS/FAITH LEADERS OF OTHER CHRISTIAN DENOMINATIONS

I am satisfied that the child is baptised/dedicated/has become a member of the faith

Yes No

Denomination/Faith: _____

Parish/Faith Community Stamp/Seal:

Signature of authorised Minister/Faith Leader: _____

NAME IN BLOCK CAPITALS: _____

Date: DD/MM/YYYY

Parish/Faith community: _____



PART 4 - TO BE COMPLETED BY MINISTERS/FAITH LEADERS OF OTHER FAITHS

I am satisfied that the child is baptised/dedicated/has become a member of the faith

Yes No Denomination/Faith: _____

Signature of authorised Minister/Faith Leader: _____

NAME IN BLOCK CAPITALS: _____

Date: DD/MM/YYYY

Name and address of the child's designated place of worship:

PART 5 TO BE COMPLETED BY PARENT/CARER

The oversubscription criteria for admission to St Peter's Sixth Form in 2019-2020 are reproduced below. In order to ensure that places are offered fairly and in accordance with the Admissions Policy, please tick the highest criteria box, which most accurately applies to your child. *The brackets refer to notes in the Admissions Policy.*

- Catholic looked after or previously looked after children
- Catholic children who have exceptional medical, social, compassionate or family needs
- Other Catholic children
- Other looked after or previously looked after children
- Children of other faiths
- Any other children

I confirm that I have read and understood the Sixth Form Admissions Policy and that the information I have given on this form is accurate and truthful. 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 the Governing Body may withdraw any offer of a place, even if the child has already started at the school.

Parent/Carer signature _____

Print full name Mr/Mrs/Miss/MS/Dr _____

Date: DD/MM/YYYY