

CORPUS CHRISTI CATHOLIC HIGH SCHOOL

Together in One Body

DIOCESE OF LANCASTER

ADMISSION TO CORPUS CHRISTI CATHOLIC HIGH SCHOOL

**SUPPLEMENTARY APPLICATION FORM**

If you are applying for a place for your child at Corpus Christi Catholic High School please complete this form **in addition** to the Common Application Form available online or issued by the Local Authority. This supplementary information form will assist the Governors of the school in deciding whether your child qualifies for a place. Failure to complete the form may affect where your child is placed within the oversubscription criteria. **Please complete in BLOCK CAPITALS and return to the School**

|  |
| --- |
| SURNAME OF CHILD: ………………………………………………………………………………………………………………………..FORENAME(S): ………………………………………………………………………………………………………………………….DATE OF BIRTH: ………………………….. |

|  |
| --- |
| **PARENT/CARER/CONTACT INFORMATION:**FULL NAME: …………………………………………………………………………………………………………………………………….ADDRESS: ……………………………………………………………………………………………………..….……………………………POST CODE: ………………… TELEPHONE NUMBER: …………………………………..DOES THE CHILD LIVE AT THIS ADDRESS: YES 🞏 NO 🞏IF NO THE CURRENT ADDRESS OF CHILD: ……………………………………………………………………………………………….NAME OF BROTHERS(S)/SISTERS(S) STILL ATTENDING CCCHS IN SEPTEMBER OF THE COMING SCHOOL YEAR:……………………………………………………………………………………………………………………………………………..……….. NAME OF PRESENT SCHOOL: ……………………….…………………….. FROM: ………………….. TO: …………..……………. |

|  |
| --- |
| IS YOUR CHILD: BAPTISED ROMAN CATHOLIC 🞏 NON CATHOLIC 🞏 |

|  |
| --- |
| **FOR BAPTISED ROMAN CATHOLICS:**MONTH OF BAPTISM: ……………………………………………. YEAR: ……………………….PARISH OF BAPTISM: ……………………………………………………………………………………………………………………...PARISH LOCATION (TOWN/CITY): ………………………………………………………………………………………………………..PARISH IN WHICH YOU LIVE NOW: ………………………………………………………………………………………………………. |

|  |
| --- |
| You are asked to enclose a copy of the baptismal certificate with this form. If this is not possible explain below: ………………………….................................................................................................................................................................... |

|  |
| --- |
| For pupils who are not Catholic but wish to have a faith based education in a Catholic school: please complete below to confirm that the applicant is a member of your faith community.Signed: ……………………………………………………………… Print Name: …………………………………………………………..Address: ………………………………………………………………………………………………………………………………………….Telephone Number: ………………………………………… Position held: …………………………………………………………….. |