## Diocese of Middlesbrough St Richard's VC Academy SUPPLEMENTARY INFORMATION FORM



St Richard's VC Acad	demu			ROMAN CATHOLIC ACADEMY TRUS
Marfleet Lane	<i>ਰ</i>			
Hull				
HU9 5TE				
Child's Details				
Child's Surname:				
Child's Forename				
Date of Birth:				
Home Address:				
Postcode				
arent/Carer Details	·			
Parent 's Name				
(Mr/Ms/Miss/Mrs) Address (if different fro	om above):			
·	·			
Mobile Telephone				
Email Address				
etails of Religion				
	Catholic		Other Christian	Other faith
Religion of child: (Please tick)	Catholic		Other Christian (name of	Other faith
			denomination)	
Catholic Parish you live in:				
Church where child was baptised and date of				
baptism: (baptism	certificate	e required)		
Name and position	n of priest	or religious leader		
supplying reference	e (where	appropriate):		
Applicants from ot	her Christi	an denominations an	d other faiths may c	attach a letter, confirming
membership from	their minis	ter or religious leader		

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

Signed	. Date

## Checklist:

You **MUST** complete your Local Authority's Common Application Form and return it as instructed to them by the closing date. If this is not done, your application cannot be looked at.

## Have you enclosed:

Copy of baptism certificate Certificate of Catholic Practice (where necessary) Evidence of exceptional need (where necessary).