

## OAKLANDS CATHOLIC COMPREHENSIVE SCHOOL, STAKES HILL ROAD, WATERLOOVILLE, PO7 7BW

#### **SUPPLEMENTARY INFORMATION FORM - 2022-23**

#### **DRAFT FOR CONSULTATION**

#### **PLEASE NOTE:**

- 1) PARENTS WHO WISH TO PROVIDE ADDITIONAL INFORMATION WHICH IS NOT ON THE CAF, CAN COMPLETE THIS FORM TO ALLOW THE GOVERNORS OF OAKLANDS CATHOLIC SCHOOL TO RANK APPLICATIONS IN ACCORDANCE WITH THE ADMISSION POLICY IN THE EVENT OF OVERSUBSCRIPTION.
- 2) THIS IS NOT AN APPLICATION FORM. FOR YOUR APPLICATION TO BE CONSIDERED YOU MUST COMPLETE A LOCAL AUTHORITY COMMON APPLICATION FORM (CAF), PREFERABLY ONLINE.
- 3) THIS FORM SHOULD BE RETURNED TO THE ADMISSIONS SECRETARY AT OAKLANDS.

About your child:					
Surname:					
First Name:					
Date of Birth:					
Address					
Post Code:					
School Currently Attending:					
Parent/Principal Carer:					
Email:					
Telephone Number:					
Child's Religion (Please tid	ck)				
Baptised Catholic Other Christian Denominations Other Faiths					
About your Church / Place of Worship:					
Please indicate which Parish Church / Place of Worship you belong to:					
1 loads maleate which i anon original in the of wording you belong to.					
Name of Priest / Minister/ Religious Leader:					
Address:					
Tel. No:					
Email:					

PLEASE ARRANGE AN APPOINTMENT WITH YOUR PARISH PRIEST / MINISTER OR RELIGIOUS LEADER TO ENABLE THE COMPLETION OF PART B OF THIS FORM

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#### Part B

# Clergy/Religious Leader Information - other Christian denominations and other recognised Faiths

#### Please complete below

Is the denomination to which your Church is affiliated a member of an Eastern Christian Church (see list on school website under Admissions) or a member of Churches Together in England or the Evangelical Alliance (check for an up to date list at <a href="www.cte.org.uk">www.cte.org.uk</a> or <a href="www.eauk.org">www.eauk.org</a>?

Yes / No

How long has the family been attending this Church/Place of Worship?						
Confirmation of Commitment to Practice (Please tick relevant box)						
Yes No						
Signature of Parish Priest/Minister/ Religious Leader						
Name (Block Capitals please)						
Date						
NB: In the event that a Parish Priest/Minister/Religious Leader has moved on in the previous year and is unable to be contacted, a member of the parish council or member of the parish nominated by the Priest/Religious Leader may be considered.						
Box for Church / Place of Worship Stamp						

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#### **DRAFT FOR CONSULTATION**

### Part C

I enc	lose tl	he fo	ollowing	g phot	ocopies	as req	uested k	by the	Oaklands	Admissions	Policy:
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Catholic Applicants	;	Other Christian denominations or other recognised Faiths				
Baptismal Certificate		Baptismal Certificate				
		Or				
		Dedication Certificate				
		Or  Letter confirming the child's membership of a Christian denomination or other recognised Faith				
		n this form is correct. I understand that any place formation, even if my child has started a new				
Signature of Parent/0	Guardian:					
Date:						
Have you complete	d your Local Authority's (	Common Application Form? (Preferably online)				
	For office use only					
Date:	Actions:					
	Complete/Incomplete	:				
	Category:					
	M R:					
	Distance:					
	Decision:					

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