

## St Mary Magdalen's Catholic Primary School Worple Street, London SW14 8HE



## Supplementary Information and Priest's Reference Form

This form must be completed when applying for a place at St Mary Magdalen's Catholic Primary School by 15/1/2021. Please complete and sign the form below and hand it to your parish priest or the parish priest at the church at which you normally worship. He will add his reference and forward the form to the school to which you wish to apply. If you are not a Catholic, please hand the form to your minister or equivalent who will add his or her reference.

To be completed by the parents or carers \_\_\_\_\_ Date of birth: \_\_\_\_\_ Surname of child: Christian/forename(s) of child: Religion, e.g. Catholic, C. of E. etc: Date and place of baptism (if applicable): (If Catholic, please show your parish priest, or the priest at your normal place of worship, a certificate of baptism in a Catholic Church or a certificate of reception into full communion with the Catholic Church or other evidence of baptism.) Will the applicant have a sibling at the school at the time of admission?: Parent or carer name: Parent or carer religion: \_\_\_\_\_ Postcode: \_\_\_\_\_ Contact numbers. Home: \_\_\_\_\_ Alternative number: \_\_\_\_\_ If Catholic, indicate which Mass you normally attend (time): Saturday/Sunday: \_\_\_\_\_ Parish in which you live (e.g. St Mary Magdalen's, Mortlake): Usual place of worship (if different): How long have you worshipped there? \_\_\_\_\_ years During this time, how frequently have you attended Mass? Less often Weekly Once or twice a month Please add here any additional information relevant to the admissions criteria which you would like your priest to know, specifically information if you are applying under the oversubscription criteria. I confirm that the information I/we have given on this form is accurate and truthful. Parent/Carer Signed:

**Catholic parents/carers:** Please hand this form to your parish priest or to the priest at your usual church of worship. He will forward the form to the school at which you seek a place for your child.

To be	e completed b	the Catholic priest only:		
The f	<b>amily</b> is knowi	to me through (please tick):		
	Attendance	Attendance at Mass weekly (as defined in our Admissions Policy)		
	Attendance at Mass once or twice a month			
	Attendance at Mass less often than once a month			
Iam	satisfied that th	e child is a baptised Catholic or has been received into full communion with the Catholic C	hurch:	
	Yes	□ No		
Pleas	se comment, if	ppropriate, <b>only</b> to clarify the Mass attendance above:		
Pries	t's name:			
Paris	h (if any):			
Address:		Tel:		
	t's signature:	Parish stamp or seal:		
Date				
		ction below and return it as soon as possible to the school indicated overleaf.	alent who	
Instr	uctions to the	ly by a non-Catholic minister or equivalent. oriest, minister or other faith leader:		
		return this form without delay to the Clerk to the Governors at the Catholic school indicate m to the parents or carers.	ed overleaf.	
	☐ I confirm that this child/family is known to me and are members of our faith community			
	This family	not known to me		
Name	e:	Signed: Date:		
Posit	ion:	Parish or organisation:		