## APPLICATION FOR

## ST FRANCIS' CATHOLIC PRIMARY SCHOOL Nursery

## Please return this form to the School Office.

Child's Christian/Forename:	Common or or			
Child's Christian/Forename:	Surname:			
Chosen Name:	Gender:	Male/Female (Please Circle)		
Date of Birth:				
All correspondence to be addressed to Mr & Mrs/Mr/Mrs/Ms (delete as appropriate)				
Name:	Relationship to child:			
Address:				
	Post (	Code:		
Telephone Number: Home:	Mobile:			
Brothers/sisters currently attending school:				
Surname First Name		Date of Birth		
	9	***************************************		

Which Church do you regularly atte	end? _			
I can confirm that all the information I have given on this form is true to the best of my knowledge. I understand that if I have given any false information, this may invalidate my application.				
I have requested a Certificate worship (if applicable).	of Catholic P	ractice/letter of support fro	m my place of	
Along with this Application For documentation:	°m, you <u>mus</u>	<u>t</u> present the originals of	the following	
<ul> <li>✓ Your child's Baptismal Certification</li> <li>✓ Your Council Tax Bill, Housing B</li> <li>✓ A utility bill dated within 6 telephone bill or bank statement</li> </ul>	Benefit or Cou months of	ncil Tenancy Agreement for th		
Application forms should be preser	nted at the sci	hool office.		
I wish for my child to be educated	in a Catholic	School.		
Signed: (Parent/Carer)		Date:		
FOR OFFICE USE ONLY				
Received by:	Date:	Receipt No:		
Copies of the following documentat				
Baptismal Certificate				
Proof of address (1)	Туре	Date of issue	Date of issue:	
■ Proof of address (2)	Туре	Date of issue:	Date of issue:	
For Office Use Only: 0/S Category:	Sibling:	Looked after (Y/N):	Distance:	