Supplementary Application Form You will be asked to provide copies of baptism certificates and birth certificates.			
Surname of child			
Forenames of child			
Date of birth			
Gender			
Address of child (Please note proof may be required)			
Postcode			
Parent(s) Name(s)			
Email address			
Mobile telephone number			
Landline telephone number			
School(s) Applying for			
Which Catholic Parish do you live in?			
Religion			
Are you able to produce a baptism certificate?	I I	o □ o □	
Year group applying for and/or date of entry to Reception/Nursery class?			
Is your child Looked After	or Previously Looked After?	Yes 🗆	No 🗆
Does your child have a statement of Special Educational Needs (SEN) or an Yes No D Education Health and Care Plan (ECHP)?			No 🗆
	cceptional social, medical, educational or religious et only at the school(s) that you are applying to?	Yes 🗆	No 🗆
Does your child have a sibling in the school at the time of admission? Yes □ No □ Name of sibling(s): Ves □ No □			
Please ensure the form is returned to the Catholic school(s) to which you are applying. You will still need to complete the Oldham Council Online Application Form. For applicants for Reception Class, please ensure the form is returned to school before the Oldham LA admissions deadline date.			
For oversubscription criteria, please refer to the Admission Policy on the school website. CFOS Schools are GDPR compliant.			
Signed: Date:			

Catholic Federation of Oldham Schools

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