**Diocese of Middlesbrough**

**St Mary Queen of Martyrs VC Academy**

**SUPPLEMENTARY INFORMATION FORM**

**St Mary Queen of Martyrs VC Academy, Nidderdale, Hull, HU7 4BS**

**Child’s Details**

|  |  |
| --- | --- |
| Child’s Surname: |  |
| Child’s Forename |  |
| Date of Birth: |  |
| Home Address: |  |
| Postcode |  |

**Parent/Carer Details**

|  |  |
| --- | --- |
| Parent ‘s Name  (Mr/Ms/Miss/Mrs) |  |
| Address (if different from above): |  |
| Mobile Telephone |  |
| Email Address |  |

**Details of Religion**

|  |  |  |  |
| --- | --- | --- | --- |
| Religion of child: (Please tick) | Catholic | Other Christian  (name of  denomination) | Other faith |
| Catholic Parish you live in: | |  | |
| Church where child was baptised and date of baptism: (baptism certificate required) | |  | |
| Name and position of priest or religious leader supplying reference (where appropriate): | |  | |
| Applicants from other Christian denominations and other faiths may attach a letter, confirming membership from their minister 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).