

# St Mary's Catholic Primary School



*Learning and Loving, Caring and Sharing*

*Through the Message of Christ*

## ADMISSIONS FORM : Priest's Reference (page 1)

Name and Address of the Child for whom you are applying for a place

Your name and address (Give all names by which you are or have been known. Give all addresses at which you have resided in the past three years)

Your telephone number, email address and contact details

What is your relationship to the child (Parent, grandparents, guardian, etc)

Please give details of your religious affiliation

Which parish, parishes or places of worship do you normally attend for Sunday Mass (or first Mass on Saturday) in the last year. Please tick the box that most accurately describes your practice. Give the name and contact details of the Parish priest/s and the names and addresses of the churches.

|                     |                          |                       |                          |
|---------------------|--------------------------|-----------------------|--------------------------|
| Every week          | <input type="checkbox"/> | Once every six weeks  | <input type="checkbox"/> |
| Three weeks in four | <input type="checkbox"/> | Once every two months | <input type="checkbox"/> |
| Two weeks in four   | <input type="checkbox"/> | Once every six months | <input type="checkbox"/> |
| One week in four    | <input type="checkbox"/> | Once a year           | <input type="checkbox"/> |

Please give any other supporting information concerning your religious affiliation and practice that you wish to be taken into account.

### Parental declaration

I certify that the information given in this form is true to the best of my knowledge. I accept that if any of this information is subsequently found to be false, my child maybe liable to lose their place at the school.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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## ADMISSIONS FORM : Priest's Reference (page 2)

### Priest's Declaration

*\* Please delete as appropriate*

- I certify that \_\_\_\_\_ has signed this self declaration form and that the information he/she has given concerning his/ her religious practice is accurate to the best of my knowledge.
- I certify that \_\_\_\_\_ has signed this self declaration form. I have recorded below, under 'comments', any reservations that I may have concerning the accuracy of the information on religious practice.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parish : \_\_\_\_\_

Phone contact number: \_\_\_\_\_

Parish Stamp

**Comments:** (Use a separate sheet for additional comments, if necessary)

**Please note: Completed copies of this form should be returned to the school.**