

**Faith guides us to inspire every student to be the best they can be.**

**ADDITIONAL INFORMATION TO SUPPORT APPLICATION FOR ENTRY FOR SCHOOL YEAR**

# Starting: September 2026

SURNAME: ..........................................................................................................................

STUDENT'S CHRISTIAN

NAMES:.............................................................................................

STUDENT'S DATE OF BIRTH: ........../ ........../ ..........

ADDRESS: .......................................................................................................

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.................................................. POST CODE: .................................

HOME TELEPHONE NUMBER:

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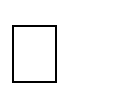
WORK TELEPHONE NUMBER(S): ......................................................

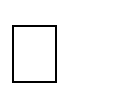
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(FATHER) (MOTHER)

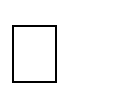
# RELIGION: It is very important to provide the following information as it could have a significant impact on your application

***If your child is Roman Catholic, please:***

 Supply a copy or original baptismal certificate/proof of baptism

 state in which Parish you live

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 state whether your child has made his/her First Communion? YES / NO

***If your child is not a baptised Roman Catholic* please** state here your reasons for choosing this Catholic school for his / her education and provide a letter of support from your local minister or copy of baptismal certificate.

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# NAMES OF ANY BROTHERS/SISTERS PRESENTLY ATTENDING SAINTS PETER AND PAUL CATHOLIC HIGH SCHOOL

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WE/I recognise and support the spiritual, academic and pastoral aims of the school as outlined in the school prospectus.

**SIGNED.........................................................................................................Parent/Guardian**

**COMPLETION OF THIS FORM DOES NOT CONFIRM A PLACE AT SAINTS PETER AND PAUL CATHOLIC COLLEGE**

# PLEASE COMPLETE AND RETURN BY 31 OCTOBER 2025