**For Office Use only**

| | |
|---|---|
| **Criteria** | |
| **Sibling** | |
| **Distance** | |
| **EHC** | |
| **CLA** | |

**ARCHDIOCESE OF LIVERPOOL**
**SUPPLEMENTARY FAITH REQUEST FORM**

*'Christ be in our heads, in our hearts and in our hands'*

**ST. TERESA'S CATHOLIC PRIMARY SCHOOL PENWORTHAM**

**Name of Child** _____

**Date of Birth** _____

**Address of Child** _____

_____

**Post Code** _____

**Home Telephone No.** _____

**Email Address** _____

**1.** Is the child a baptised Catholic? Yes ___ No _____

**2.** If yes. Please state parish of baptism and date (see note 1)

_____

**3.** If your child is not a Baptised Catholic, please state to which denomination or faith, if any, your child belongs? (see note 2)

**4.** (a) Does your child have a sibling attending St Teresa's? Yes ___ No ___

(b) Name of sibling ----------

**Note**

**(1)** Evidence of Baptism – Catholic/Non Catholic
Please provide with this form a copy of the child's Baptismal certificate.

**(2)** Evidence of Faith

**5. Signature**

I/We certify that the information given on this form is correct.
The school reserves the right to verify the information given on this form.
Completion of this form does not guarantee an offer of a place.

Parent/Guardian: _____ Date: _____

Return To: St Teresa's Catholic Primary School, Stanley Grove, Preston, PR1 0JH

Office use: Return by date: ____/____/____
Admission year: _____
School Number 07/045. DfE No: 888/3953