****	Ursuline
	High School
SERVIAM	WIMBLEDON

Year 7 entry

## Supplementary Information Form For Sontombor 2020

## For September 2020

THE SCHOOL'S ADMISSION POLICY SHOULD BE READ BEFORE COMPLETING THIS FORM

To be returned to the school by 31st October 2019

FOR OFFICE USE		
Application No.		
Date received		
Category		
Distance		
ID		

#### PLEASE USE A BLACK PEN AND BLOCK CAPITALS

DETAILS OF CANDIDATE (Girl)	DETAILS OF APPLICANT (Parent or person with Parental Responsibility)
GIRL'S SURNAME OR FAMILY NAME	Title (Mr/Mrs Miss/Ms/Dr etc)
GIRL'S FIRST NAME	SURNAME
OTHER NAME (S)	FIRST NAME
DATE OF BIRTH	CONTACT E-MAIL ADDRESS
HOME ADDRESS (Candidate's permanent residence)	HOME ADDRESS (If different from Candidate's address given)
POSTCODE	POSTCODE
YOUR LOCAL AUTHORITY	HOME TELEPHONE
NAME OF PARENT(S) CARER(S) LIVING AT THIS ADDRESS Please indicate Mrs / Mr / Miss / Ms (or an alternative)	MOBILE TELEPHONE
Please indicate role by selecting PARENT or CARER	RELATIONSHIP TO CANDIDATE (Mother, father, carer)

#### **ADMISSIONS CRITERIA**

Please tick the admissions criteria which you believe applies to the candidate: (ONLY TICK ONE BOX)

- Looked After or previously Looked After Baptised Catholic girls in the care of a Catholic family. (Please enclose a copy of the Baptism Certificate and a letter from the relevant Local Authority confirming the legal status of the child, a copy of the care order, or a copy of the special guardianship order).
- 2. 
  Other Looked After and previously Looked After Girls.
  (Please enclose a letter from the relevant Local Authority confirming the legal status of the child, a copy of the care order, or a copy of the special guardianship order).
- 3. Girls whose parent is a member of staff and has been employed at the school for two years at the time at which the application for admission is made and/or the member of staff is recruited to fill a vacant post for which there is a demonstrable skill shortage. (Please enclose a confirmation letter from HR)

- Girls who are Baptised and Practising Catholics. (Return to the school: a copy of the Baptism Certificate and the Religious Practice Form on page 3.
- 5. Girls who are Practising Christians and those of Other Faiths. (You need to provide a written reference from your family's minister of religion / faith leader, on headed paper, stating that your daughter is a member of the relevant faith. Please do not complete page 3 as this is for Baptised and practicing Roman Catholic applicants).

PLEASE STATE FAITH	
PLEASE STATE FAITH	

6.  $\square$  All other applicants.

Tel: 020 3908 3167

(i.e. Applicants who do not meet the criteria above).





#### IN THE EVENT OF OVER SUBSCRIPTION

If applications exceed places, priority will be given within

Ca	cii ciiteria and sub-ciiteria to.		
1.	Applicants who will have either a sister at Ursuline High School or a brother at Wimbledon College at the time of admission. If this applies to your daughter, please give the name (s) of the sister (s) and/or brother (s) and their current year group:		
	SIBLING NAME:		
	SIBLING'S CURRENT CLASS AND YEAR GROUP:		
2.	Applicants who have a strong social or compassionate need which makes the school particularly suitable. If this applies		

to your daughter please tick the appropriate box:

П Social

Compassionate

Attach a supporting letter from your daughter's present school and from an appropriate authority (e.g. a qualified medical practitioner, education welfare officer, social worker or priest) providing specific evidence relating your daughter's needs to a place in the school.

#### REMINDERS

- It is the applicant's responsibility to ensure correct postage on the envelope. Ursuline High School does not accept responsibility for any forms that do not arrive at the School.
- If you require acknowledgement of receipt for your supplementary form, please enclose a stamped self-addressed postcard or envelope.
- Please note we are unable to issue receipts for hand delivered forms. The Admissions Officer will post receipts if a stamped self-addressed envelope has been enclosed.
- A Common Application Form (CAF) from your Local Borough also needs to be completed.
- Ursuline High School DFE Number: 315 5400

#### PLEASE RETURN THIS FORM TO:

The Admissions Officer **Ursuline High School Crescent Road** London **SW20 8HA** 

#### CHECKLIST

### I HAVE ENCLOSED: Please tick appropriate boxes

#### Criteria 1 / 2 applicants:

A letter from the relevant Local Authority, a copy of the care order or a copy of the special guardianship order (for Looked After or previously Looked After applicants)

#### Criteria 1 /4 applicants: (Catholic Applicants)

A Baptism Certificate. Please enclose a copy as we are unable to return originals.

#### Criteria 3 applicants:

A letter of confirmation from HR at Ursuline High School

#### Criteria 4 applicants: (Catholic Applicants)

O The Religious Practice Form (s) Please note: Verification of Mass attendance is required for three years. If it is necessary to obtain reference (s) from more than one Parish, please complete a Religious Practice Form for each Parish. Further copies of the form are available online at www.ursulinehigh.merton.sch.uk or from the School Office.

#### Criteria 5 applicants:

Written reference on headed paper from family's minister of religion / faith leader.

#### Criteria 4 / 5 / 6 applicants:

If applying under special circumstances criteria within your category: Letters to support social or compassionate grounds from your daughter's present school and an appropriate authority.

#### SIGNATURE OF PARENT(S) CARER(S)

I/We hereby confirm that the details on this form are correct.

**SCHOOL OFFICE** 

Tel: 020 3908 3167

**RECEIVED** 



# Religious Practice Form For Category 2 Applicants only

To be returned to the school with pages 1 and 2 of the Supplementary Information Form

## APPLICANTS: PLEASE COMPLETE THE WHITE PART OF THE FORM <u>ONLY</u> AND THEN HAND THIS PAGE TO YOUR PARISH PRIEST

Your Priest should complete the shaded area <u>including</u> the <u>Parish Stamp</u> and return the form to you. You should then return the completed form(s) to the school with the Supplementary Information Form.

#### ONLY FOR BAPTISED CATHOLIC GIRLS ATTENDING ROMAN CATHOLIC CHURCHES

GIRL'S SURNAME OR FAMILY NAME	TO BE COMPLETED BY CATHOLIC PRIESTS ONLY	
GIRL'S FIRST NAME	Please check the applicant has filled in the white part of the form only, complete this	
OTHER NAME (S)	shaded area, including the parish stamp and return the form to the applicant.	
DATE OF BIRTH	TO THE BEST OF MY KNOWLEDGE:  Please tick the appropriate box:	
NAME OF PARENT(S) CARER (S)	The child has received the sacrament of baptism.	
	YES   NO	
HOME ADDRESS	GIRL'S ATTENDANCE OF MASS ON SATURDAY EVENING OR SUNDAY  1. Please tick which applies: (Only tick one box)	
7///	☐ Weekly (as a minimum 3 out of 4)	
	☐ Fortnightly	
POSTCODE	☐ Monthly	
HOME TELEPHONE MOBILE TELEPHONE	☐ Less than Monthly	
	☐ Never 2. For how long has this been the candidate's usual prac-	
CONTACT E-MAIL ADDRESS	2. For how long has this been the candidate's usual practice? (Only tick one box)	
	□ 3 Years or More	
MY DAUGHTER IS A BAPTISED ROMAN CATHOLIC	☐ Between 1 — 3 Years	
YES NO D	□ Under 1 Year	
	PRIEST'S NAME	
BAPTISM DATE		
	PRIEST'S SIGNATURE	
BAPTISM CHURCH		
	PRIEST'S TELEPHONE	
GIRL'S ATTENDANCE OF MASS ON SATURDAY EVENING OR SUNDAY		
Please tick which applies:	CHURCH NAME:	
□ Weekly		
☐ Fortnightly	CHURCH LOCATION:	
☐ Monthly		
Less than Monthly	DATE	
□ Never		
2. For how long has this been the candidate's usual practice?	PARISH STAMP OR SEAL	
Years		

Tel: 020 3908 3167