



Supplementary Information: Archdiocese of Southwark

The Supplementary Information Form (SIF) is included on the next page.

Please return to St John's Catholic Comprehensive School, Rochester Road, Gravesend, Kent, DA12 2JW by Friday 21st May 2027 – please see the important guidance below:

To submit this Supplementary Information Form (SIF) to the school, you can either:

- a) Scan and email the form to sixthformadmissions@stj.kent.sch.uk
You will receive an acknowledgement email to confirm the form has been received.

or

- b) Hand the form into a member of our school reception team.
You will be issued with a receipt when you hand your form into reception.

Please do NOT hand in the form to any other member of staff or leave the form at reception without receiving a receipt – the school cannot accept liability for a lost form unless you are able to produce a receipt of submission.

Important Information:

- Completion of a supplementary form is not mandatory but will assist Governors in determining admissions applications.
- **If your child is Catholic, please hand the form to your Catholic Priest to complete PART TWO A.**
- **If your child is of non-Catholic Faith or Denomination, please hand the form to your Minister of Religion, or equivalent to complete PART TWO B.**



SUPPLEMENTARY INFORMATION FORM FOR SIXTH FORM ADMISSION IN 2027

I understand that I also have to apply via Kent Choices https://www.kentprospectus.co.uk/		Please tick	
Child's Surname			
Child's Forename			
Date of Birth			
Address (including postcode)			
Telephone (parent)			
Email (parent) (please print)			
Full name of Parent(s) (including title)	1.		
	2.		
Name of Legal Guardian (if different from above)			
Parent/Guardian Address (if different from above)			
		Yes	No
1. Is your child a baptised Catholic? <i>If yes, you must enclose a copy of your child's baptism certificate with this form. Photocopies are acceptable but will be retained by the school.</i>			
2. Catechumenate. Is your child not yet baptised Catholic but is enrolled in a programme and has a date for their baptism confirmed? If yes, please state the date of baptism: _____ <i>You <u>must</u> also obtain a letter from the parish priest confirming this information and your child's baptism date.</i>			
3. Looked After Child? <i>This includes: Looked after children, previously looked after children who have been adopted or who have become the subject of a residence or guardianship order, and children who appear to have been in state care outside of England and ceased to be in state care as a result of being adopted.</i> <i>If yes, you must enclose a document evidencing status with this form</i>			
I confirm that the information I have provided on this form is accurate and truthful:			
Signed: _____ (Parent/Guardian) Date: _____			
Full name of Parent/Guardian (please print) _____			

For office use only: Date SIF received by Admissions Officer:

Copy of Baptismal Certificate received: Yes ☐ No ☐

Catechumen and evidence received: Yes ☐ No ☐

Looked After Child and evidence received: Yes ☐ No ☐

PART TWO A - Parents/Carers from Catholic Faith should hand this form to their Catholic Priest. The completed form should be returned by the parent/carer to St John's.

PART TWO A – To be completed by the Catholic Priest

Parents' or Carers'

Is the family known to you? Yes ☐ No ☐

Child's religious practice

Is the child known to you? Yes ☐ No ☐

Across the last three years, how would you describe the child's attendance to Mass?

Weekly attendance at Mass ☐

(i.e. every Saturday evening or Sunday)

Regular attendance at Mass ☐

(i.e. twice a month)

Irregular attendance at Mass ☐

(i.e. less than once a month)

Not Known ☐

If you consider there are valid reasons for Mass attendance to be considered equivalent to weekly, because of illness or other reasons, please state below.

I am satisfied that the child has been received into Full Communion with the Catholic Church ☐

Priest's name:

Parish (if any):

Address:

.....

.....

Telephone No:

Parish stamp or seal:

Priest's signature:

Date:

PART TWO B - Parents/Carers from other Denominations or Faiths should hand this form to their Minister of Religion, or equivalent. The completed form should be returned by the parent/carer to St John's.

PART TWO B - To be completed only by a Minister of Religion or equivalent

I confirm that this child/family is known to me and they are committed members of our Faith community ☐

I confirm that this family are members of our Faith community ☐

The family is not known to me ☐

Name:

Signed:

Date:

Position:

Parish or Organisation: