## ST PATRICK'S RC HIGH SCHOOL

invalid.

## SUPPLEMENTARY INFORMATION REQUEST FORM



This form should only be completed for children who do not attend one of the five contributory primary schools. Please note that completion of this form does not constitute an offer of a place for your child. This form should be returned to the school. Please note that giving false information could render the application

Child's surname			Child's fi	rct name	2	
Male/Female			Child's first name			
-		Date of birth  Mobile tel number:				
Parent/Carer's name						
Parent/Carer's name Child's permanent home address including			Mobile tel number:			
<u></u>	incluaing	<b>Shared Parenting</b> – Child's 2 <sup>nd</sup> home address				
postcode						
			Postcode	· ·		
Postcode:			Posicode.			
Home telephone num		Home telephone number				
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Religion other than Ro	oman Catho	olic (please state)				
Parent/Carer employed	d by the sch	nool				
Parent/Carer employed by the school  Name: Role:			Date employment commenced:			
		noie.			zace employment commenced.	
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Non-Feeder School Roi	man Catho	lic children only				
Non-Feeder School Roi Please confirm your ch			olic by encle	osing a	copy of the	Baptism/Reception
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