

## Ss Alban & Stephen Catholic Infant & Nursery School Vanda Crescent, St Albans, Herts AL1 5EX Supplementary Information Form 2018-19



Child's Details

child's Details						
Child's First Name:		Ch	Child's Surname:		Date of Birth:	
Home Address:					Post Code:	
Parent/Carer De	tails				1	
1 <sup>st</sup> Parent/Carer's Name:			Address:			
			Telephone Num	nber:		
Alternative contact details:		Address:				
		Telephone Number:				
Details of Religio	on					
Religion of Child: (please tick) Co		Catholic	Catholic Other Christian		Other Faith	
Parish you live in:		Church where child was baptised & date of baptism (baptismal cert required if not baptised in Ss Alban & Stephen)				
Church you currently attend:				Name of priest suppl Certificate of Cathol Practice:		
<ul><li>normally wors</li><li>Applicants fr</li></ul>	ships. om other Chri	stian den		Date:	·	,
You MUST co do not do thi	omplete the La	cal Autho e offere	ority's Applicatio	on Form and return it t er see <u>www.hertsdirec</u>	•	
	copy of a gas	s, electri	_	council tax bill, or a	tenancy agre	ement, dated within
Have you:				e (where appropriate) ice (where appropriate	2)	
			of of address (a		-,	

Provided evidence of exceptional need (where appropriate)

Completed the Local Authority's Application Form