## St. Benedict's Catholic Primary School



## SUPPLEMENTARY FAITH FORM

	OOT LEMENTARY FAITH ORW
This fo	orm should be completed by the parent/guardian and RETURNED TO THE SCHOOL.
Name o	of child:
Date of	Birth:
Addres	s of child: (Proof required)
Name o	of Parent/Guardian
Telepho	one Number
1.	Is the child a baptised Catholic?
2.	If yes, please state parish of baptism and date
3.	In which parish do you now live?
4.	If your child is not a baptised Catholic, please state to which denomination or faith, if any, your child belongs (see Note 2)
Notes 1.	Evidence of Baptism – Catholic Proof of baptism in the form of a Baptism Certificate is required. If you do not have a Baptism Certificate your Parish Priest will be required to confirm your child is a baptised Catholic by completing and signing the section below.
2.	Evidence of Faith Group membership  a) If your child is to be considered under the relevant criterion as other than Catholic Christian, please state your Christian denomination. Proof of Baptism in the form of a Baptismal Certificate or confirmation in writing by completing the statement below to show that your child is a member of a faith community by an appropriate Minister of Religion is required.
	b) If you belong to a faith other than the Christian faith, please state to which faith you belong. An appropriate faith leader would need to confirm in writing by completing the statement below that your child is a member of their faith group.
	Minister of Religion/Faith Leader
	Minister/Leader (Print name):
	Address:
	Position held:

Signed and dated: