ROSARY CATHOLIC PRIMARY SCHOOL 238 HAVERSTOCK HILL, LONDON NW3 2AE

SUPPLEMENTARY INFORMATION FORM 2025 - 2026

Please fill out all sections of this form in BLOCK CAPITALS

Child's Details:

Child's surnan	ue.		Ch	ild's first r	name	
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Child's other n	names:		Kn	own as:		
Date of birth:						
Child's addres	ss:		l			
Full Postcode:	r.					
			l l			
Parent/Carer	Details:					
Parent's name) :					
Address if diffe	erent to child	's:				
Phone:					Full	postcode:
Home:						
Other						
contact:						
Details of Reli	igion:					
Religion of child: (Please tick)	Catholic			ristian (nan e.g. Methodis		Other faith (please specify)
Catholic Pari	sh you live ir	າ:				

Additional Details:

September 2025:	D : (: (:) : (! ! ! ! !	
Name(s): 1.	Date(s) of birth:	Current Year Group:
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2.		
3.		
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Is your child 'looked	after' by the Local naving previously been	
'looked after' or sub	0.	YES NO
arrangements' or sp		
order or internationa		
previously been 'loo	ked after'? (Please	
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Does your child hav	e exceptional medical, pasto	ral or social needs that can onl
Does your child have be met by attendance	e exceptional medical, pasto	ral or social needs that can onl le. (Professional evidence will
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Please note:

• You **must** complete your local authority's Common Application Form for Reception Intake and return it to the council offices by the closing date. If you do not do this, you will not be offered a place.

Checklist:

Have you enclosed? Copy of Baptism Certificate (if applicable)

Proof of child's date of birth. For example, an NHS card.

Evidence of exceptional need (where appropriate)

The school is committed to protecting the information provided by parents/carers and using it only for the purpose for which it was obtained. For information on the school's Privacy Notice please look on the school website under Privacy Notice or contact the school by hard copy.