

## **Admissions to primary schools 2012**

Please find attached the supplementary information form for All Saints Catholic Primary School, Golborne, Wigan. You are strongly advised to complete this form so that the governing body have all the information they need to consider your application against their faith criteria. **The governing body can only consider your application if you have stated All Saints Catholic Primary School, Golborne, Wigan as one of your three preferences on your application (either your home local authority primary school application form or online application).**

### **Returning supplementary information forms:**

Please return the attached supplementary information form to the school by the closing date: **15 January 2012:**

### **School address:**

All Saints Catholic Primary School, Golborne, Wigan  
Hazel Grove  
Golborne  
Warrington  
WA3 3LU

If you have any questions about completing this supplementary form please do not hesitate to contact the school on 01942 747655.

The School Places Team can offer advice about Admissions to Primary Schools. Their contact details are:

The School Places Team,  
People Directorate: Children, Adults & Families,  
Progress House,  
Westwood Park Drive,  
Wigan  
WN3 4HH

**Phone:** 01942 486037, 486038, 486039, 486040

**Email:** [schoolplaces@wigan.gov.uk](mailto:schoolplaces@wigan.gov.uk)

**Website:** [www.wigan.gov.uk](http://www.wigan.gov.uk)



**ARCHDIOCESE OF LIVERPOOL  
SUPPLEMENTARY FAITH REQUEST FORM**

**ALL SAINTS CATHOLIC PRIMARY, GOLBORNE**

This form must be completed by the parent/guardian and signed by a Minister of Religion.

**SECTION A** *(to be completed by Applicant)*

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_  
\_\_\_\_\_

What is your faith community \_\_\_\_\_

Parish/area of faith community in which you live \_\_\_\_\_  
\_\_\_\_\_

**SECTION B** *(to be completed by Minister of Religion)*

If Roman Catholic would you confirm that the applicant is a baptised Catholic (*proof of baptism is required*).

Yes

No

If Christian would you confirm that the applicant is a baptised Christian

Yes

No

If of a faith other than Christian please would you confirm that the applicant is a member of your faith community.

Yes

No

Signed (Minister of Religion): \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

Position Held: \_\_\_\_\_

Please return form to: \_\_\_\_\_