



ARCHDIOCESE OF LIVERPOOL
SUPPLEMENTARY FAITH REQUEST FORM

ST. MARY'S CATHOLIC HIGH SCHOOL
An 11-18 Specialist Mathematics and Computing College



A copy of this form should be completed by the parent/guardian for **EACH Catholic school applied to and returned as detailed in the booklet for parents "Admission to Secondary School 2024-25"**

Name of school applied for: _____

Name of child: _____

Address of child: _____

Current Primary School: _____

1. Is the child a baptised Catholic? Yes _____ No _____
2. If yes, please state Church where baptism took place **and** date of baptism.

3. In which Pastoral area do you now live? Please state name of Church. (*see Note 1*)

4. If your child is not a baptised Catholic, please state to which denomination or faith, if any, your child belongs (*see note 2*)

5. Does your child have a sibling who attends St. Mary's Catholic High School? Yes/No
If yes, please provide name and form of sibling(s):

Notes

1. **Evidence of Baptism – Catholic**
If you are applying for a Catholic secondary school and your child was baptised in one of the Pastoral areas served by the school then the baptismal records will be checked by the school to confirm baptism. If your child was baptised in another parish a baptismal certificate or the completion of the statement below will normally be required to confirm your child is a baptised Catholic.
2. **Evidence of Faith Group membership**
 - (a) If you are applying for a Catholic school and want to be considered under the relevant criterion as an 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 statements 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): _____ Position held: _____

Establishment Name: _____

Address: _____

Contact Telephone Number: _____

Signed and dated: _____