



SUPPLEMENTARY INFORMATION FORM (S.I.F)

Admissions 2027 – 2028

To be completed for all students seeking a place at St. Edward's, Poole under Categories 2-5.

This form must be completed having read and accepted the Admissions Policy for the year of planned entry to the school.

The information given on this form is used to help the Governing Body apply the school's Admissions Policy.

If you are applying under Category 2-5 you are advised to complete this form together with your Priest, Minister or Faith Leader.

Please note the following points very carefully:

- It is your responsibility to ensure that this form is fully completed.
- You must ensure that the information on this form is true, correct and accurate.
- You understand that the Governing Body will make a decision solely on the basis of the information that you provide, and that they are not permitted to use discretion or personal insight to assist them.
- The Governors' Admissions Committee will not process forms where there is missing or incorrect information and your child will automatically be placed in Category 6.
- You must ensure that this form is submitted on time.

Your **main application** form must be sent to the Local Authority Admissions team.

This form (S.I.F) must be sent to the **St Edward's School Office** marked for the attention of the Attendance and Admissions Manager.

Both forms must be received by 31st October 2026. If an online application is made, this form (S.I.F) must be sent to the St Edward's School Office by 31st October 2026.

Additional information

For applications for children moving into the local area, information must be provided by the priest/minister/faith leader of their previous church/faith community, and endorsed by their accepting local church/faith community.

If your child is 'looked after' or 'previously looked after' this will be notified to the Governors by the Local Authority. Please note that all children in care have priority in Category 1.

St. Edward's School complies with the General Data Protection Regulations (GDPR) Act 2018. The information you supply is being collected for the purpose of providing an education service, but may be used for wider purposes and will be retained with your child's education record. When you submit this document you are consenting to that use. The information may be shared with BCP, those with parental responsibility, education establishments, other local authorities, the Department for Education, Diocesan bodies, other service providers to enable them to fulfil their statutory duties and any appeal panel that is convened with respect to your application.

Checklist – prior to submission:

- 1. I have indicated on the main application form if my child has a brother or sister already at St. Edward’s school.

- 2. I have completed **and signed** the correct section of the S.I.F and my minister has correctly completed their section.

- 3. All information is correct at the time of application.

IMPORTANT: The Governors’ Admissions Committee will not process forms where there is missing or incorrect information and your child will automatically be placed in Category 6.
(The Governing Body cannot accept assurances of future actions, such as Baptism).

I have completed and checked all information required, I have read and accepted the Admissions Policy for the year of planned entry to the school.

Signed:.....

Date:.....

Please print name:.....



SUPPLEMENTARY INFORMATION FORM – ST EDWARD’S VA SCHOOL

Thank you for applying to St. Edward’s School. We are really pleased that you are considering us for your child’s next steps in education. Every year we receive varying numbers of applications under each category, so please indicate clearly the category under which you are applying.

As a Voluntary Aided (VA) school, applicants must provide additional information on this form as part of their application process. If you need any assistance in completing this form, please contact us in advance of submitting your form. We are unable to provide support after submission. For questions about religious practice, please consult your Priest, Minister or Faith Leader.

Please complete Section 1

This information should be the same as on the main application form. (PLEASE PRINT)		
SECTION 1	Name of child	
	Date of birth	
	Name of parents/carers	
	Contact email address	
	Address	
	Is there a brother or sister already attending St. Edward’s	<input type="checkbox"/> NO <input type="checkbox"/> YES If yes, please provide name

Please indicate the Category under which you are applying. Please note that if you are applying under Category 1 or 6 you do not need to complete this form.

CATEGORY	PLEASE TICK
Category 2 – Roman Catholic	
Category 3 – Church of England	
Category 4 – Churches Together (not to be used by applicants who attend Category 2 or Category 3 churches)	
Category 5 – Other Christian Churches or Faith Communities (not to be used by applicants who attend Category 2, Category 3 or Category 4 churches)	

Please complete ONE of the following categories 2-5 (page numbers 2 – 4)

CATEGORY 2 ROMAN CATHOLIC APPLICANTS	I confirm that (name of child)			
	Was baptised at (name of Church and town)			
	On	Day:	Month:	Year:
	AND has attended services at (name of church and town) At least monthly for the last twelve months			
	Your priest must also complete the below information in full:			
	I confirm the information given in this section is true and correct.			
	Name of current parish priest			
	Signature of parish priest	Signature	Date	
	Name of previous parish priest (if applicable)			
	Signature of previous parish priest (if applicable)	Signature	Date	
Please check that all information is fully completed.				

CATEGORY 3 CHURCH OF ENGLAND APPLICANTS	I confirm that (name of child)			
	Was baptised or had a service of thanksgiving at (name of Church and town)			
	On	Day:	Month:	Year:
	AND has attended services at (name of church and town) At least monthly for the last twelve months			
	Your priest or minister must also complete the below information in full:			
	I confirm the information given in this section is true and correct.			
	Name of current parish priest or minister			
	Signature of parish priest or minister	Signature	Date	
	Name of previous parish priest or minister (if applicable)			
	Signature of previous parish priest or minister (if applicable)	Signature	Date	
Please check that all information is fully completed.				

From Churches which are a member church of **Churches Together in Britain and Ireland** as stated on the CTBI website ctbi.org.uk/member-churches (including Baptist Union, Methodist, listed Orthodox, listed Pentecostal and United Reform churches, the Salvation Army, and members of the Religious Society of Friends).

CATEGORY 4 CHURCHES TOGETHER APPLICANTS <small>(not to be used by applicants who attend Category 2 or Category 3 churches)</small>	I confirm that (name of child)		
	Was baptised at / or has met my church's criteria for membership/practice at – <i>delete as applicable</i> (name of Church and town)		
	On	Day:	Month: Year:
	By means of (please state how membership criteria was met)		
	AND has attended services at (name of church and town) At least monthly for the last twelve months		
	Your priest/minister/church leader must also complete the below information in full:		
	I confirm the information given in this section is true and correct.		
	Name of current priest/minister/church leader		
	Denominational Affiliation if applicable		
	Signature of priest/minister/church leader		Signature Date
	Name of previous priest/minister/church leader (if applicable)		
	Signature of previous priest/minister/church leader (if applicable)		Signature Date
	Please check that all information is fully completed.		

CATEGORY 5 OTHER CHRISTIAN CHURCHES OR FAITH COMMUNITIES APPLICANTS <small>(not to be used by applicants who attend Category 2, Category 3 or Category 4 churches)</small>	I confirm that (name of child)			
	Was baptised at / or has met my Church or faith community's criteria for membership/practice at – <i>delete as applicable</i> (name of place of worship and town)			
	On	Day:	Month:	Year:
	By means of (please state how membership criteria was met)			
	AND has been practising at (name of place of worship and town) at least monthly for the last twelve months			
	Your priest/minister/church leader must also complete the below information in full:			
	I confirm the information given in this section is true and correct.			
	Name of current priest/minister/church leader			
	Denominational Affiliation if applicable			
	Signature of priest/minister/church leader		Signature	Date
Name of previous priest/minister/church leader (if applicable)				
Signature of previous priest/minister/church leader (if applicable)		Signature	Date	
Please check that all information is fully completed.				

Please read carefully:

Please ensure that you have fully completed the form. The Governors' Admissions Committee can only consider your application in the category under which you have applied.

Incomplete or inaccurate information may result in the Panel being unable to allocate a place to your child.

To Check	PLEASE TICK
Section 1 complete with child details, parent or carer details, and all contact details.	
Correct category completed.	
All information and dates completed in relevant religious category (2 – 5)	
Signature from priest/minister/church or faith leader obtained.	