

St Bede's Inter-Church School
(A Church of England/Roman Catholic Academy)

SUPPLEMENTARY INFORMATION FORM SEPTEMBER 2027-2028

PLEASE COMPLETE THIS FORM IN CONJUNCTION WITH THE SCHOOL'S ADMISSIONS POLICY

This Supplementary Information Form should be used only if you are applying for a place at St Bede's. If you are applying under criterion 2, 3 or 4 your priest, minister, elder or spiritual leader should complete the relevant section on page 2.

Name of Child: Date of Birth:

Name of Parents/Guardians:

Home Address:

Post code: Contact telephone number in case of queries:

Under which criterion are you applying? **2 3 4** (please circle and complete relevant section below)

Criterion 2 – Roman Catholic / Anglican

(who are baptised or otherwise recognised as a full Member of the Anglican / Roman Catholic Church and whose status is confirmed as such by their priest or minister)

Is your child Roman Catholic or Anglican (Please circle)

Please state the name of your church / parish.

.....
If your child has been baptised Roman Catholic / Anglican please state

Place:

Date:

Criterion 3 – Other Christian Denominations

(Evangelical Alliance / Churches Together in England / Partner Churches of Affinity)

Please state the Christian denomination of your child.

.....
Please state the name of your church.

.....
If your child has been baptized, confirmed or accepted into full membership of your Christian denomination please state:

Place:

Date:

Criterion 4 – World religions

Please state the religion your child follows:

If your child has been accepted into full membership, please state:

Place:

Date:

Please state the name of your place of worship.

Declaration to be signed by Parent/Guardian

Name of Child: Date of Birth:

I wish my son/daughter to be considered for entry into St Bede's. I have read all the information in the school prospectus and am prepared to support the Governing Body, Headteacher and staff to ensure that the school's Code of Conduct is kept and that its Roman Catholic / Anglican foundation is upheld.
I confirm that all the information contained on page 1 of this SIF is accurate.

Signed: Date:

CONFIRMATION BY PRIEST, MINISTER, ELDER OR SPIRITUAL LEADER

When applying under criterion 2, 3 or 4 please pass this form to your Priest, Minister, Elder or Spiritual Leader, ask them to complete this section and return the form to the address given below:

Name of Child: Date of Birth:

Name Role.....

Place of Worship..... Telephone

Address.....

- I can confirm that this church is a full member of Churches Together in England ☐
- I can confirm that this church is a full member of the Evangelical Alliance ☐
- I can confirm that this church is a full member of the Partner Churches of Affinity ☐
- I can confirm that I am the spiritual leader of the place of worship stated above. ☐

- I can confirm that the child applicant named overleaf and above is known to me as a member of my place of worship and I support their application to St Bede's Inter-Church School. ☐

- I can confirm that have seen the baptism certificate / record of membership for the child applicant named overleaf and above and am satisfied that the child meets the relevant faith criteria. ☐

Signature of Clergy/Spiritual Leader: Date:

Printed name of Clergy / Spiritual Leader

This form should be returned to the Admissions, St Bede's School, Birdwood Road, Cambridge CB1 3TD