

St Bonaventure's

FAITH LEADER FORM

Section A: To be completed by Parent/Carer before seeing Faith Leader

Name of Parent / Carer	
Relationship to child	
Place of Worship	
Faith	
Faith Leader	

Please also give any other details which may be relevant or useful

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Contact details:

Address: _____

Postcode: _____

Telephone _____

***Note:** Parent is the person who legally has parental responsibility for the child. If applying for more than two children, please give details on a separate sheet for all children. If not mother or father, please state clearly the relationship with the child.*



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Information about the child

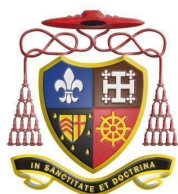
Name	
Date of Birth	

Why do you wish your child to attend a Catholic School?

Signature of Parent/Carer _____

Date _____

The Faith Leader should retain the first two pages of this document and pass the third page onto St Bonaventure's as soon as possible.



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Faith Leader's Reference

This part must be completed by the Faith Leader

Parent/Carer to complete

Name of Child _____

Date of Birth _____

Name of Parent/Carer _____

Faith Leader to complete

(please circle)

- | | | |
|---|-----|----|
| 1. The parent/carers is known to me | Yes | No |
| 2. The child is known to me | Yes | No |
| 3. Do you consider the child to be a member of <i>the faith</i> | Yes | No |

Please write any further information that you may think will support the application

Name of Faith Leader _____

Position _____

Date _____

Signature

A Seal must
be used over
the
signature to
authenticate

Thank you for taking the time to complete this form. We are grateful for your prompt attention. Please could you ensure the form is returned to the admissions officer at St Bonaventure's School by the published deadline date - 31st October

St Bonaventure's, Boleyn Rd, Forest Gate, London E7 9QD