

HALLAM DIOCESE IN PARTNERSHIP WITH SHEFFIELD CITY COUNCIL

# Declaration of Worship

## Additional information to make an application for Sacred Heart Catholic Primary School

PLEASE COMPLETE IN BLOCK CAPITALS AND RETURN TO SACRED HEART CATHOLIC PRIMARY SCHOOL.

Name of child for whom application is made

.....

1a Are you a member of a Christian Denomination/World Faith?  YES  NO

1b If yes please name the Christian Denomination/World Faith.

.....

2 Please name your present place of worship.

.....

3 How frequently have you attended this place of worship and for how long?

.....

4 Is this application made because you want a Christian education for your child?  YES  NO

5 Is this application being made because of a regular pattern of worship by parents/carers and child at least twice a month over the previous twelve months.  YES  NO

6 If yes please complete the Minister's Referral form over the page and then ask your minister to countersign it.

7 If new to your named place of worship within the last twelve months reference is required from your previous Minister.

Full name and signature of person(s) completing this form:

Name: ..... Signature: .....

Date: .....



# Minister of Religion Referral Form

Name of child:.....

Name(s) of parent/carer:.....

Address of parent/carer.....  
.....

In determining faith admission applications priority is given to:-

- a) parents/carers and children who can prove a long-standing and regular pattern of worship at Sacred Heart Parish Church. This is defined as worship by at least one parent/carer with the child at least twice a month over the past year.
- b) Those children who have attended on average twice a month, a place of public worship (e.g. church, Sunday School, Mosque, Temple.)

The parents/carers are asked to complete the details below at Section 1 and then ask their minister of religion to countersign the form at Section 2.

## Section 1

- a) We the parent/carer(s) of .....have/have not worshipped at least twice a month for the previous twelve months.
- b) Our child (name of child).....has/has not attended a place of public worship twice a month for the previous twelve months.

Signed (parent/carer) ..... Date:.....

## Section 2

Countersign by minister of religion.....

Tel Number .....

Address .....

Any other comments .....

Thank you for your help