

## Supplementary Information Form for Reception Year Admission in Sept 2026

To be completed for all applicants applying for a faith-based place. Must be returned to the school by 15th January 2026. Please go to your place of worship and complete the information below. Once completed and stamped, please send via email to admissions.npsw@nishkamschools.org and add the Year group and "Supplementary Information Form" to the subject box by 15th January 2026. Please ensure all statements are circled correctly and all sections are filled in otherwise the SIF maybe rejected. Please title the SIF file as student name followed by the student's date of birth. Any issues please email admissions.npsw@nishkamschools.org

Please note you should receive email acknowledgement of your SIF. If you have not received acknowledgement before the submission deadline, please email admissions.npsw@nishkamschools.org

Section A: About you and your child

| Full name of child         |                            |              |  |
|----------------------------|----------------------------|--------------|--|
| Date of birth (DD/MM/YYYY) | Name of parent or guardian |              |  |
| Home address               |                            | Post code    |  |
| Email Address              |                            | Phone Number |  |

Please state your regular place of worship

Please kindly go to your regular place of worship to have this form signed.

Section B: FOR SIKHS ONLY Confirmation that a Sikh child/parent/guardian is/are Amritdhari or child is Keshdhari.

| Confirmation to be made by an a (Please circle Yes or No to all three statements)  |  | rudwara.                           |   |
|--|--|------------------------------------|---|
| I. Yes / No I confirm that the child a   | ınd parent/guardian named above              | e are known to me.                 |   |
| <ol> <li>Yes / No I confirm that the child rinitiation at the Gurdwara held of Gurdwara/Jatha/Dharmic event).</li> <li>Yes / No I confirm that the parent Sanchar initiation held on (date)</li> <li>Yes / No I confirm that the child remains the child remains and the same and</li></ol> | on (date) att/guardian named above was initi | ated as a Khalsa with(Name of orga | (Name of organising                             |
| Name   | Signature                                    |                                    | Official stamp of Gurudwara                     |
| Position   | Name of<br>Gurudwara                         | _                                  |   |
| Address  | Post code                                    | Tel                                |   |
| Section C: FOR NON-SIKHS ONL   | Y 6 6 1 1 1 1 1                              |                                    | <u>Date:</u><br>dian of another religion is/are |

baptised (or formally initiated) into that religion.

| Confirmation to be made by an authorised signatory of an appropriate place of worship or religious body. (Please circle Yes or No to both statements and fill in all the details)   |  |                     |  |     |                                    |
|---|--|---------------------|--|-----|------------------------------------|
| Yes / No I confirm that the child and parent/guardian named above are known to me. Yes / No I confirm that the applicant (and/or parent or guardian) named above was/were are baptised and/ or practising their faith (or formally initiated) into the (name of religion/faith) |  |                     |  |     |                                    |
| Name  |  | Signature           |  |     | Official stamp of place of worship |
| Position  |  | Place of<br>worship |  |     |                                    |
| Address   |  | Post code           |  | Tel | <u>Date:</u>                       |

| <ul> <li>Please sign below to confirm that the following statements are true.</li> <li>I confirm that the information given in this form is accurate and true.</li> <li>I understand that any intentionally mispleading or fraudulent information provided about me or my child may result in the invalidation of my application and withdrawal of any place offered.</li> </ul> |        |  |  |  |
|--|--------|--|--|--|
| Name   | Signed |  |  |  |
| Relationship to child  | Date   |  |  |  |