

Supplementary Information Form for In Year Admission

To be completed for all applicants applying for a faith-based place. 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. Please ensure all statements are circled correctly and all sections are filled in otherwise the SIF maybe rejected. Any issues please email admissions.npsw@nishkamschools.org Please note you should receive email acknowledgement of your SIF. If you have not received acknowledgement please email

Section A: About you and your child

admissions.npsw@nishkamschools.org

Full name	of child						
Date of birth	(DD/MM/YYYY)			Name of pare guardian	ent or		
Home address					Post code		
Email A	ddress					Phone Num	nber
	Please kir	egular place of w ndly go to your r ONLY Confirma	egular plac				n signed. /are Amritdhari or child
(Please circle Ye I. Yes / No I 2. Yes / No I initiation at Gurdwara/Ja 3. Yes / No I Sanchar init	confirm that to confirm that to confirm that to the Gurdwa tha/Dharmic every confirm that to confirm that the confirm that the confirmation that the	ara held on (date) ent). the parent/guardian r	all the details) guardian name ve was initiated	d above are kno I as a Khalsa wi	own to n th <i>Khand</i> a Khalsa (Name of	a-di-Pahul du with Khanda	ring the Amrit Sanchar (Name of organising -di-Pahul during the Amrit urdwara/Jatha/Dharmic event).
Name	Committee Condition	are crime named abov	Signature	(nas ancac na	.).		Official stamp of Gurudwara
Position			Name of Gurudwara				
Address			Post code		Tel		
							Date:
		ONLY Co (or formally initiation)				oarent/gua	rdian of another
(Please circle Ye Yes / No I co Yes / No I co faith (or form	es or No to both sonfirm that the onfirm that the ally initiated) i	statements and fill in all t e child and parent/gua	he details) ardian named a arent or guardi igion/faith)	above are know an) named abov	n to me. ve was/w	ere are bapt	
•	•	es or similar evidenc			,	*	
Name			Signature				Official stamp of place of worship
Position			Place of worship				

Section D: Confirmations by parent or guardian.

Address

Please sign below to confirm that the following statements are true.							
 I confirm that the information given in this form is accurate and true. 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. 							
Name		Signed					
Relationship to child		Date					

Tel

Date:

Post code

NB No further evidence is needed if this form is properly completed. Any additional evidence, such as a letter from a Gurudwara, place of worship, or religious body will only be considered if it addresses the School's admissions criteria, other factors cannot be considered.