

## 6<sup>th</sup> Form Declaration of Jewish Practice 2020-2021

External applicants must complete Sections 1, 2 and 3

Surname of child: ..... First Name: ..... Date of Birth: .....

### Section 1. Are you a looked-after child, or a child who was previously looked-after? Yes/No

If 'Yes' – please enclose supporting evidence from the professional dealing with your case.

### Section 2. Are you a 'Jewish child' (as described in the Admissions Policy and Procedures document)? Yes/No

If 'Yes' - please complete either Part A or Parts B and C below as appropriate.

If 'No' - please sign the Declaration in Section 3.

### Part A. Have you or one of your parents attended at least 4 synagogue services in the 6 months prior to this application? Yes/No

If 'Yes' - please either have the declaration below signed or attach documentary evidence to confirm such attendance. **Now go to Section 3.** You do not need to complete Part B and C below.

If 'No' - you must satisfy **BOTH** Part B and C below.

**Rabbi, lay leader or authorised synagogue representative declaration:** I confirm that to the best of my knowledge the information in Part A is correct.

Signed: ..... Date: .....

Name of signatory: ..... Synagogue: .....

Address: ..... Postcode: .....

### Part B. Have you or one of your parents been engaged in formal Jewish Education (either provided at a Synagogue, Jewish school, Cheder/Hebrew school (or equivalent) or by a tutor) on at least 3 occasions in the 6 months prior to this application? Yes/No

If 'Yes' - please either have the declaration below signed or attach documentary evidence to confirm such engagement.

If 'No' – please sign the Declaration in Section 3.

**Rabbi, tutor or authorised school/synagogue representative declaration:** I confirm that to the best of my knowledge the information in Section B is correct.

Signed: ..... Date: .....

Name of signatory: ..... Position: .....

Organisation: ..... Postcode: .....

### Part C. Have you or one of your parents been involved in a volunteer capacity in any Jewish communal, charitable or welfare activity (with no financial value or practical benefit to JCoSS or any associated body) on at least 3 occasions in the 6 months prior to this application? Yes/No

If **Yes:** please specify name of organisation and have the declaration below signed. If '**No**' – please sign the Declaration in Section 3.

I confirm that to the best of my knowledge the information in Part C is correct.

Signed: ..... Date: .....

Name of signatory: ..... Position: .....

Organisation: ..... Postcode: .....

**Section 3. Student/Parent Declaration**

I wish to be considered for a place as a student at JCoSS and declare that the above information is true and correct in every detail. I understand that if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn.

Student's signature: .....

Date: .....

Parent's signature: .....

Date: .....

Parent's name (**BLOCK CAPITALS**): .....

Home Address of child: .....

Please post this form, together with the relevant evidence, by **Friday 24<sup>th</sup> January 2020 to:**  
**6<sup>th</sup> Form Admissions, JCoSS, Castlewood Road, New Barnet, EN4 9GE.**