Jewish Community Secondary School Castlewood Road, New Barnet EN4 9GE Tel: 020 8344 2220 Email: 6thform@jcoss.barnet.sch.uk Website: www.jcoss.org



Sixth Form Certificate of Religious Practice 2026-2027

External applicants only joining between 1st September 2026 and 31st August 2027 must complete <u>questions 1, 2 and 3</u>

Surname of child:	First Name:	Date of Birth:
1. Are you a looked-after child, or a child		
If 'Yes' – please enclose supporting evidence	e from the professional dealing with	your case.
2. Are you a 'Jewish child' (as described in	the Admissions Policy and Procedur	es document 2026-27)? Yes/No
If 'Yes' - please complete either section A or se		If 'No' - please go to section 3.
Section A. Have you or your child attende	ed at least 4 synagogue services in the	e six months prior to this application? Yes/No
If Yes: please either have the declaration be attendance. Then go to Question 3 below.	<u> </u>	entary evidence from the synagogue to confirm such a B and C below.
If No: you must satisfy BOTH Sections B an	ı d C below.	
Rabbi, lay leader or authorised synagogue	representative declaration: I confirm	n that to the best of my knowledge the information
in Section A is correct.		
Signed:	Date:	
Name of Signatory:	Position	
Synagogue:		
Address:		
		1 Osteode:
Section B. Has your child been engaged in	formal lewish education (either pro	wided at a synagogue, lewish school
		the six months prior to this application? Yes/No
		vidence to confirm such engagement. Please
Rabbi, tutor or authorised school/synagog	ue representative declaration: I confi	rm that to the best of my knowledge the information
in Section B is correct.		
Signed:		Date:
Name:	Position:	
Organisation/Provider:		
		5
		Jewish communal, charitable or welfare activity nat least 3 occasions in the six months prior to this
If Yes: please specify name of organisation	and have the declaration below signe	d.
Jewish Communal/Charitable/Welfare act is correct.	ivity Declaration: I confirm that to the	e best of my knowledge the information in Section C
Signed:	Date:	
Name:	Position:	
Organisation:		
Address:		
		Postcode:

Yes/No	If 'Yes', please complete Section D below:
Section D. Hav	e you or your child attended at least four religious services in the six months prior to this application? Yes/No
If Yes: please e	ther have the declaration below signed $\underline{\mathbf{or}}$ attach documentary evidence to confirm such attendance.
Religious Leade is correct.	r or authorised representative declaration: I confirm that to the best of my knowledge the information in Section D
Signed:	Date:
Name of Signator	y:
Place of Worship.	
Address:	
	Postcode:
Declaration:	
	sidered for a place as a student at JCoSS and declare that the above information is true and correct in every detail. I
I wish to be con	sidered for a place as a student at JCoSS and declare that the above information is true and correct in every detail. I if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn.
I wish to be con	
I wish to be con understand that	
I wish to be con understand that Student's signat	if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn.
I wish to be con understand that Student's signat Parent's signature	if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn. Date:
I wish to be con understand that Student's signat Parent's signature Parent's name:	if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn. Date: Date:
I wish to be con understand that Student's signature Parent's name: Mobile No:	if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn. Date: Date: BLOCK CAPITALS)
I wish to be con understand that Student's signature Parent's name: Mobile No: Email:	if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn. Date: Date: BLOCK CAPITALS) Home No:
I wish to be con understand that Student's signature Parent's name: Mobile No: Email:	if a place is obtained on the basis of incorrect or inaccurate information, the offer may be withdrawn. Date: Date: BLOCK CAPITALS) Home No:

3. Is your child applying as an "Other-faith Child" (as detailed in the Admissions Policy and Procedures –2026-27 document)?

Please post this form, together with the relevant evidence, by Friday 23rd January 2026 to:

<u>Sixth Form Admissions, JCoSS, Castlewood Road, New Barnet, EN4 9GE.</u>

Or scan and email to 6thform@jcoss.barnet.sch.uk