

IN YEAR ADMISSIONS 2026-2027

Supplementary Information Form

for applicants joining between 1st September 2026 and 31st August 2027

You must complete the E-Admissions Form provided by Barnet Local Authority. If you do not, your child will not be considered for a place. This form (the "SIF") is needed if you wish to be considered as a priority applicant. The information enables us to apply our over-subscription criteria correctly. In the absence of the SIF, children will be considered as non-priority applicants.

This form should be completed IN BLOCK CAPITALS and then returned to the Admissions Officer by post.

Please refer to the Admissions Policy and Procedures 2026-27 document when completing this form.

Surname of Child: First Name: Date of Birth:

1. Is the child applying as a Jewish Child (as detailed in the Admissions Policy and Procedures – 2026-27)?

Yes: please complete Sections A-C below as appropriate.

No: please skip to Question 2 overleaf.

Section A. Have you or your child attended at least four synagogue services in the six months prior to this application? Yes/No

If **Yes:** please either have the declaration below signed or attach documentary evidence to confirm such attendance. Then **go to Question 2 below**. You do not need to complete Section B and C below.

If **No:** you must satisfy BOTH Sections B and C below.

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

Signed: Date:

Name of Signatory: Position:

Synagogue:

Address:

..... Postcode:

Section B. Has your child 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 six months prior to this application? Yes/No

If **Yes:** please either have the declaration below signed or attach documentary evidence to confirm such engagement. Please **ALSO** complete section C below.

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: Position:

Organisation/Provider:

Address:

..... Postcode:

Section C. Have you or your child 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 six months prior to this application? Yes/No

If **Yes:** please specify name of organisation and have the declaration below signed.

Jewish Communal/Charitable/Welfare activity Declaration: I confirm that to the best of my knowledge the information in Section C is correct.

Signed: Date:

Name: Position:

Organisation:

Address:

..... Postcode:

2. Is your child a looked-after, or previously looked after child? Yes/No

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

3. Name of any sibling/s currently enrolled at JCoSS:..... Year Group:

Name of any sibling/s previously enrolled at JCoSS: Date left JCoSS

4. Is either parent a current member of JCoSS staff with a permanent contract of employment who has completed two years of service? Yes/No

Name of member of staff:.....

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

Yes/No If 'Yes', please complete Section D below:

Section D. Have you or your child attended at least four religious services in the six months prior to this application? Yes/No

If Yes: please either have the declaration below signed or attach documentary evidence to confirm such attendance.

Religious Leader or authorised representative declaration: I confirm that to the best of my knowledge the information in Section D is correct.

Signed: Date:

Name of Signatory: Position.....

Place of Worship.....

Address:

..... Postcode:

Please ensure that you have submitted and returned the E-Admissions form to Barnet Local Authority.

Please ensure that you have included relevant documentation (photocopies are acceptable) **including any other evidence to support the application as detailed above.**

Please post this form, together with the evidence to:

Admissions Officer, JCoSS, Castlewood Road, New Barnet, EN4 9GE. Please ensure you apply the correct postage.

Receipt of this SIF will be acknowledged by email.

Declaration:

I wish my child 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.

Signature: Name: Date:
(BLOCK CAPITALS)

Mobile No: Home No:

Email: (Please write clearly)

Home Address of child: (BLOCK CAPITALS).....

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For office use only: Date received Follow-up date Date completed

A ☐ B ☐ C ☐ 1st ☐ 2nd ☐ 3rd ☐ 4th ☐

L/A ☐ Sibling ☐ Staff ☐ Complete ☐

Additional information included with application.....

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