Certificate of Religious Practice (CRP) to Support an Application for a Priority Place at a Nursery or Primary School Under the Religious Authority of the Office of the Chief Rabbi of the United Hebrew Congregations and the Commonwealth For Entry in September 2024

PLEASE ENSURE THAT ALL RELEVANT PARTS OF THE FORM ARE COMPLETED AND SIGNED

- 1 A completed and valid copy of this form should be sent to the school no later than 12th January 2024.
- 2 If the form is not received in time, it may not be possible to treat the child as a priority applicant.
- 3 In order to obtain points in section 1, the parent/guardian must <u>register</u> the child at least two days in advance of attendance at the synagogue(s) which they propose to attend preferably by email or online (see synagogue website).
- 4 In order to obtain points in sections 2 and 3, it is the responsibility of the parent/guardian to complete this form and take, or send, it to the person(s) referred to in those sections in order to have it validated.
- 5 The school will not consider a CRP to be complete and valid if it does not contain the required declarations.
- 6 The relevant person(s) may decline to sign this form where the parent/guardian or the child is not personally known to them and/or cannot vouch for the parent/guardian or the child.
- 7 To be considered a priority applicant, the parent(s)/guardian(s) or child will be required to achieve **FOUR (4) points** on behalf of the child.
- 8 Although there is NO benefit in obtaining MORE than FOUR (4) points, it is hoped that families will continue with the various activities in which they have become involved.
- 9 The completed and valid CRP may be used **at any time** when applying for a place in a primary school. Parent(s)/guardian(s) are advised to keep a copy of the completed form and supporting documents.
- 10 A completed CRP 2024 may be used for 2025applications.
- 11 Please note that, in addition to the dates, criteria for the CRP for entry in September 2025 may change.

Child's surname	Child's first name(s)	
Date of birth	Child's Hebrew name	
Full postal address	Parent's/Guardian's Name and Telephone Number	

1 Since 6 May 2023, how many times have you, the child's other parent/guardian, or the child attended Shabbat morning synagogue religious services or Friday night synagogue services?

Dates of Shabbat attendance need to be verified by the Rabbi or authorised official of the synagogue attended, either by attaching a signed letter or by completing the declaration below. Indication of the dates of attendance should be included in both options.

Please tick one box only

□ At least 6 times (4 points)

□ At least 3 times (2 points) □ Fewer than 3 times (0 points)

Note: Simon Marks Jewish Primary School is under the religious authority of the Office of the Chief Rabbi (OCR) but accepts synagogue attendance records ratified by Rabbis/officials of synagogue movements other than The United Synagogue. Some synagogues may only verify attendances on either Friday night or Shabbat morning. Please check with your individual synagogue to ensure you comply with their procedure. Families will **not** receive points for simply arriving on the premises. Synagogues are empowered and

are required to decline to record attendance on that basis. Dates that are eligible for recording attendance at Shabbat morning synagogue services from 6 May 2023:

ay30/1 July18/19 August6/7 October24/25 Novemberay7/8 July25/26August13/14 October1/2 Decemberay14/15 July1/2 September20/21 October8/9 Decemberne21/22 July8/9 September27/28 October15/16 December	23/24 June 11/12 August 29/30 September 17/18 November 5/6 Janua 30/1 July 18/19 August 6/7 October 24/25 November 5/6 Janua 7/8 July 25/26August 13/14 October 1/2 December 14/15 July 1/2 September 20/21 October 8/9 December 21/22 July 8/9 September 27/28 October 15/16 December	5May 23/24 June 8 May 30/1 July 9 May 7/8 July 7 May 14/15 July 8 June 21/22 July	2023 5/6May 12/13 May 19/20 May 26/27 May 2/3 June 9/10 June
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Note: For late or in-year applications, arrangements for registering and recording attendance at Shabbat services should be made with your synagogue.

Declaration by Rabbi/Authorised Official:

I confirm that to the best of my knowledge and belief the information in Section 1 is correct

Signature	Name and position of signatory	
Date	Address of signatory	

If you have gained your 4 points in Section 1, please proceed to Section 4 overleaf

educa		ool, nursery		articipated in Jewish educationa e per month in the six months p	l activities (eg Jewish adult rior to application (excluding August
Please	e tick relevant box		Yes (2 points)	□ No (0 points)	
If yes	, please specify ac	tivities, venu	e and frequency:		
Declaration I confirm th	n by Headteacher nat to the best of m	/ Teacher/C o y knowledge	ourse Leader: e and belief the informatio	n in Section 2 is correct	
Signature				Name and position of signatory	
Date				Address of signatory	
Name of Co Institution	ourse/			Postcode	
			itable/Welfare Organisa e and belief the informatio		
Signature				Name and position of signatory	
Date				Address of signatory	
*Name and Organisatio	Address of n			Postcode	
list of welfa		volunteering	opportunities can be foun	tion, please attach further declara ad on the United Synagogue's web	tion(s) to this form. A non-exhaustive site:www.theus.org.uk
	nt's/Guardian's D firm that the above		is correct.		
Signature				Name	

Date	Father/Mother/ Guardian	

Notes: In the event that it is discovered that a parent/guardian has submitted information above which is later found to be incorrect, this may result in the refusal of the School to offer a place to the child. If a place has already been offered on the basis of incorrect information, the School may withdraw the offer.

For the avoidance of doubt, this form does not confirm that the child for whom this application is made is Jewish in accordance with orthodox Jewish law.

For Scho	l use only
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Date received	Total number of points	
Child meets practice threshold	YES / NO	