

# Certificate of Religious Practice (CRP) to support an Application for a Place at Yavneh Primary School for Entry in September 2017



**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 **16 January 2017**.
2. If the form is not received in time, it may not be possible to treat the child as a faith based priority applicant pursuant to the School's oversubscription criteria.
3. In order to obtain points in section 1, the parent/guardian must register 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 faith based priority applicant, pursuant to the School's oversubscription criteria, 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. Please note that, in addition to the dates, criteria for the CRP for entry in September 2018 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 2 May 2016, how many times have you, the child's other parent/guardian, or the child attended Shabbat morning synagogue religious 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 8 times (4 points)     
  At least 4 times (2 points)     
  Fewer than 4 times (0 points)

*Note: 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 2 May 2016:**

<b>2016</b>	18 June	6 August	17 September	5 November	24 December
7 May	25 June	13 August	24 September	12 November	31 December
14 May	2 July	20 August	1 October	19 November	
21 May	9 July	27 August	8 October	26 November	<b>2017</b>
28 May	16 July	3 September	15 October	3 December	7 January
4 June	23 July	10 September	22 October	10 December	14 January
11 June	30 July	12 September	29 October	17 December	

*Note: For late or in-year applications, arrangements for registering and recording attendance at Shabbat morning religious 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.**

**2 Have you, the child's other parent/guardian, the child or its sibling(s) (as defined in the school's Admissions Policy) participated in Jewish educational activities (eg Jewish adult education, cheder, school, nursery, playgroup) at least once per month in the six months prior to application (excluding August and any Shabbat or Yom tov)?**

Please tick relevant box  Yes (2 points)  No (0 points)

If yes, please specify activities, venue and frequency:

.....  
 .....  
 .....

**Declaration by Headteacher/Teacher/Course Leader:**

I confirm that to the best of my knowledge and belief the information in Section 2 is correct

Signature		Name and position of signatory	
Date		Address of signatory	
Name of Course/ Institution		Postcode	

**3 Have you or the child's other parent/guardian participated in an unpaid voluntary capacity in a Jewish communal, charitable or welfare activity on at least 12 occasions within the last two years? NB: This does NOT include fundraising.**

Please tick relevant box  Yes (2 points)  No (0 points)

If yes, please specify name of organisation and give a brief description:

.....  
 .....  
 .....

**Declaration by Jewish Communal/Charitable/Welfare Organisation:**

I confirm that to the best of my knowledge and belief the information in Section 3 is correct

Signature		Name and position of signatory	
Date		Address of signatory	
Name and Address of Organisation		Postcode	

Notes: If these 12 occasions have included more than one organisation, please attach further declaration(s) to this form.

**4 Parent's/Guardian's Declaration**

I confirm that the above information is correct.

Signature		Name	
Date		Father/Mother/ Guardian	

Notes: Please note that if the information given in the CRP is not accurate or up to date, your child could lose priority. If a place has been offered on the basis of a fraudulent or intentionally misleading application, the application will be considered again this time applying the correct information. This may lead to the offer being withdrawn.

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 School use only**

Date received		Total number of points	
Child meets practice threshold		YES / NO	