

# EDEN PRIMARY

## Supplementary Information form

Please refer to the admissions policy and instructions at [www.edenprimary.org.uk](http://www.edenprimary.org.uk)

When you have filled in this form, please EITHER

**Scan and email it to:**

[andrea@edenprimary.org.uk](mailto:andrea@edenprimary.org.uk)

by **15 January 2019**

**OR**

**Post it to:**

School Admissions Administrator  
Eden Primary  
79 Creighton Avenue  
London N10 1NR

by **15 January 2019**

### A ABOUT YOUR CHILD

Surname of child.....

First name(s) *please circle the name your child uses* .....

Gender M / F

Date of Birth.....

Address .....

..... Post Code .....

### B ABOUT YOU

Your name.....

Relationship to child .....

Land line.....

Mobile .....

Email .....

**PLEASE COMPLETE A MAXIMUM OF ONE SECTION ON THIS PAGE**

**C** Are you a member of a synagogue, chavurah or other formal Jewish prayer group? YES / NO

If YES, please either have the declaration below signed or attach **original** evidence. If NO, please continue to section D.

Synagogue / Group officer: **I confirm that to the best of my knowledge the information in section C is correct.**

Signed ..... Date .....  
Name of signatory..... Synagogue / Group .....  
Address ..... Post code.....

**D** Have you or your child attended at least four formal Jewish services between 16/01/2018 and 15/01/2019? YES / NO

If YES, please either have the declaration below signed or attach evidence. If NO, please continue to section E.

Synagogue / Group officer: **I confirm that to the best of my knowledge the information in section D is correct.**

Signed ..... Date .....  
Name of signatory..... Synagogue / Group .....  
Address ..... Post code.....

**E** Has your child been in formal Jewish education for at least 6 months between 16/01/2018 and 15/01/2019? YES / NO

If YES, please either have the declaration below signed or attach evidence. If NO, please continue to section F below.

Education provider: **I confirm that to the best of my knowledge the information in section E is correct.**

Signed ..... Date .....  
Name of signatory..... Name of organization .....  
Address ..... Post code.....

**F** Have you been involved at least monthly as a volunteer in Jewish charity work for minimum 12 months between 16/01/2017 and 15/01/2019? YES / NO

If YES, please either have the declaration below signed or attach evidence. If NO, please continue to section G below.

Jewish charity/equivalent: **I confirm that to the best of my knowledge the information in section F is correct.**

Signed ..... Date .....  
Name of signatory..... Name of organization .....  
Address ..... Post code.....

**G** Have you been involved at least 6 times between 16/01/2018 and 15/01/2019 in any combination of:  
a) Private or family worship on Shabbat or Jewish festivals in your home?  
b) Formal Jewish learning?  
c) Formal Jewish community activities? YES / NO

For (a), please enclose a letter from a non-family member who was actually present at each event. Each event must have its own separate letter and author.

For (b) and (c), please enclose a letter from the organization involved.