**EDEN PRIMARY**

Supplementary Information Form - In-Year

**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

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| **Scan and email to:**  [yeliz@edenprimary.org.uk](mailto:yeliz@edenprimary.org.uk) | **OR** | **Post it to:**  School Admissions Administrator  Eden Primary  79 Creighton Avenue  N10 1NR |

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| A ABOUT YOUR CHILD |
| First name(s) *please circle the name your child uses* ……………………………………….…………………………  Middle name(s) ……………………………………………………………………………………………………………….  Surname of child ………………………………………………………………………………………………………………  Gender M / F Date of Birth ………………………………………………..  Address ……………………………………………………………………………..………………………………………………  ……………………………………………………… Post Code …………………………………………………… |

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| B ABOUT YOU |
| Your name …………………………………………………………………………………………………………………………  Relationship to child ...……………………………… Home number ……………………………………………..  Mobile ...…………………………………………… Email …………………………………………………….……………..  Date…………………………………………………… |

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| PLEASE COMPLETE AT LEAST ONE SECTION ON THIS PAGE FOR A FAITH BASED PLACE | |
| 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 in the last 12 months? | 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 of the last 12 months? | 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 organisation.................................................................  Address........................................................................................................................................................... Post code..................................... | |
| F Have you been involved as a regular volunteer in Jewish charity work in the last 12 months? | 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 organisation.................................................................  Address........................................................................................................................................................... Post code..................................... | |
| G Have you been involved at least 6 times in the last 12 months in any combination of:  i) Private or family worship on Shabbat or Jewish festivals in your home?  ii) Formal Jewish learning?  iii) Formal Jewish community activities? | YES / NO |
| For Section G question (i), 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 authors to show the 6 occasions clearly dated and described. Thank you.  For (ii) and (iii), please enclose a letter from the organisation involved. | |