

SUPPLEMENTARY INFORMATION FORM (SIF) GUIDANCE FOR ADMISSIONS

Dear Parent/Guardian,

Thank you for considering Beit Shvidler Primary School.

Beit Shvidler Primary School (BSPS) is a Voluntary Aided Faith School. In accordance with the School Admissions Code, the School prioritises children of the Orthodox Jewish faith. The SIF deals with the oversubscription criteria as determined by the School Admissions Code 2021. You only need to complete the SIF if you are applying to the School with a view to being considered for priority, in the event of oversubscription.

The Common Application Form (CAF) must be completed and submitted to your home local authority in addition to this SIF: THE CAF MUST NOT BE SENT TO THE SCHOOL AS THIS WILL DELAY THE APPLICATION.

The BSPS ethos includes a strong commitment to Orthodox Jewish practice, halacha and Torah values. A set of Priority Criteria to define orthodox Jewish practice has been created by the Electoral Rabbonim of the Jewish Secondary School Movement (JSSM). Children and their Parent(s)/Guardian(s) will need to meet all the Priority Criteria to be considered *Priority Children*.

The Priority Criteria are that Parent(s)/Guardian(s):

- have an orthodox Rabbi or Rabbis to whom they are known and ask questions
- attend and participate at an orthodox Synagogue
- participate in Jewish adult education
- are involved in Jewish communal life
- observe Jewish dietary laws, inside and outside their home
- observe Shabbos and Yom Tov laws, throughout the year

N.B. Definitions are found in the SIF Guidance and Definitions page. This guidance provides more details of how the School defines its oversubscription criteria and terms used in the SIF.

Given all these criteria are fulfilled, *Priority Children* will be ranked according to the following order (with 1 being the first priority and 4 being the last):

1. *Priority Children* who are 'looked after' or have been previously been 'looked after' (for definition, please see the Admissions Criteria)
2. *Priority Children* who have a sibling in the school (Rec – Y6) at the time of the close of applications. (Please refer to the Admissions Criteria for precise definition.)
3. *Priority Children* whose Parent(s)/Guardian(s) regularly attend and participate at Edgware Adath Yisroel Congregation (EAYC) (Please see Admissions Criteria for further information).
4. *Priority Children* of members of staff where the member of staff has been employed at the School for one or more years at the time of application.
5. *Priority Children* whose Parent(s)/Guardian(s) attend and participate at Other Orthodox Synagogues

To submit this form, please:

- complete Parts A (Basic Information) and B (Priority Information) of the SIF, and then
- arrange for Part C (Rabbi's Reference Form) to be completed by your orthodox Rabbi(s), as recognised by the Electoral Rabbonim of the JSSM, before the published deadline date (providing the Rabbi with the completed Parts A and B).

Please note: It is your responsibility to ensure that your Rabbi (or Rabbis) completes the Rabbi's Reference Form and that this form is submitted to the school before the published deadline date.

SIF GUIDANCE AND DEFINITIONS

Multiple applications	If you have more than 1 child, complete a separate copy of page 1 (of the SIF), for each child.
Parent/Guardian (including Carers)	This form should be completed by the person who has legal responsibility for the child applying to BSPS. Only one of the Parent(s)/Guardian(s) needs to sign this form.
Ranking	If you answer yes to any one of the questions in the Priority Ranking section, you do not need to answer the other questions in that section.
Rabbi's reference form	<p>Parents/Guardians should complete Parts A & B (pages 1- 2) of the SIF and then pass the form to their Rabbi(s) for completion of Part C (page 3). You may ask one or more Rabbis to sign for the different aspects of this section of the form.</p> <p>If in the judgement of the Rabbi signing the SIF, in the case of a single parent family, or for health reasons, or a family where an immediate family member has a disability such that this impacts on the families ability to learn or attend services as defined in the Priority Criteria, the parent should notify the Rabbi (in advance of the application) and the Rabbi's judgement will be accepted. This should be documented in question 3 of Part C (the Rabbis Reference Form).</p>
EAYC priority	To qualify for this priority, an employed Rabbi of the EAYC needs to sign the Rabbi's reference form confirming regular attendance and participation at the EAYC.
Jewish Observance	As a Voluntary Aided Faith School, and in accordance with the Schools Admissions Code (as amended from time to time), BSPS prioritise children of the orthodox Jewish faith. This is assessed in terms of observance of Sabbath and Holy Days, adherence to the Dietary Laws and observance of Orthodox Jewish Laws and practices including active participation in the services of the Orthodox Synagogue, all as defined by the JSSM.
Observing Shabbos & Yom Tov	<p>This refers to observing the rituals and halochos of Shabbos and the Holy Days. The following books should be referenced for further guidance:</p> <ul style="list-style-type: none"> • A Guide To The Practical Observance Of Shabbos by Rav Y Neuwirth (Feldheim) • The Guideline Series by Rabbi Barclay and Rabbi Jaeger (Menucha Press)
Laws of Kashrus	Standards of Jewish Dietary Laws should be referenced at http://www.theus.org.uk/category/learn-about-kosher
Attendance at synagogue	<p>An orthodox Synagogue is defined as a member Synagogue of the United Hebrew Orthodox Union, the United Synagogue or Federation of Synagogues or Synagogues recognised by the Rabbis of the JSSM as having similar orthodox standards. A list of recognised orthodox Synagogues can be found on the BSPS website.</p> <p>Regular attendance and participation means on average, attending at least 3 adult services a week, one of which must be on a Shabbos, for a minimum period of 12 months prior to the application submission.</p>
Involvement in Jewish communal life	<p>This refers to participation by one parent/guardian or both. This can include attending and volunteering for committees or programmes/events for Jewish communal organisations and charitable organisations. Examples include shul committees, organising shiurim, security, leining, chesed committees, Jewish charity work, youth groups, etc.</p> <p>Unfortunately, due to legal requirements, we cannot include any activities/support given to the school and any associated organisations.</p>
Jewish Learning	Applicants are actively involved in Jewish learning activities on a weekly basis, for at least 12 months prior to the application submission. This can include involvement by one parent/applicant, or both. Examples could include chavrusa, (online) shiurim, Phone & Learn, Synagogue based programmes, etc.

Beit Shvidler Primary School

Supplementary Information Form (SIF) for admissions

Determination of orthodox Jewish practice for Priority Eligibility

Please note, none of the information in this SIF is mandatory. However, failure to provide this information may inhibit the school's ability to determine whether sufficient grounds of priority have been demonstrated.

Part A: Basic Information

STUDENT	Forename(s):..... Surname: <hr/> Year group applying (e.g. Reception, Year 1 etc.): Date of Birth:/...../.....								
PARENT/GUARDIAN	The following contact details will only be used if there is a question related to your SIF application: Forename(s): Title:..... Surname: E mail:..... Phone number: Home address:..... Postcode:								
RANKINGS (of Priority Children)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Is the child a "looked after" child? If yes, please provide appropriate supporting documents.</td> <td style="text-align: right;">Yes []</td> </tr> <tr> <td>Does the child have a sibling currently at BSPS? If yes, please provide details: Name: Date of Birth:/...../.....</td> <td style="text-align: right;">Yes []</td> </tr> <tr> <td>Does at least one of the child's parent(s)/guardian(s) regularly attend and participate at EAYC? <small>Please note that the Rabbi of the EAYC needs to sign page 3 of the SIF to qualify for this criterion</small></td> <td style="text-align: right;">Yes []</td> </tr> <tr> <td>Is the Parent/Guardian of this child a BSPS member of staff?</td> <td style="text-align: right;">Yes []</td> </tr> </table>	Is the child a "looked after" child? If yes, please provide appropriate supporting documents.	Yes []	Does the child have a sibling currently at BSPS? If yes, please provide details: Name: Date of Birth:/...../.....	Yes []	Does at least one of the child's parent(s)/guardian(s) regularly attend and participate at EAYC? <small>Please note that the Rabbi of the EAYC needs to sign page 3 of the SIF to qualify for this criterion</small>	Yes []	Is the Parent/Guardian of this child a BSPS member of staff?	Yes []
Is the child a "looked after" child? If yes, please provide appropriate supporting documents.	Yes []								
Does the child have a sibling currently at BSPS? If yes, please provide details: Name: Date of Birth:/...../.....	Yes []								
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Is the Parent/Guardian of this child a BSPS member of staff?	Yes []								
OFFICE USE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Date of submission:/...../.....</td> <td style="width: 50%;">Signature.....</td> </tr> <tr> <td>SIF Accepted? Yes [] No []</td> <td>Date of acceptance:/...../.....</td> </tr> </table>	Date of submission:/...../.....	Signature.....	SIF Accepted? Yes [] No []	Date of acceptance:/...../.....				
Date of submission:/...../.....	Signature.....								
SIF Accepted? Yes [] No []	Date of acceptance:/...../.....								

Part B: Priority Information

PRIORITY CRITERIA (as defined in the Guidance and Definitions)	1. Do you and your family fully observe Shabbos and Yom Tov?	Yes [] No []
	2. Do you and your family adhere to the laws of Kashrus?	Yes [] No []
	3. Do you and your family regularly attend and participate in an Orthodox Synagogue? Please provide details:	Yes [] No []
	4. Are you and your family involved in local Jewish communal activities? Please provide details:	Yes [] No []
	5. Do you participate in regular Jewish adult education? Please provide details:	Yes [] No []
By completing the SIF you agree to the following:		
<ol style="list-style-type: none"> The School has absolute discretion to determine places in accordance with its admissions policy. Only information submitted to the School at the time of application, and submitted by the required deadline, may be considered. The School reserves the right to verify the accuracy of the information provided and, if it is subsequently discovered that a place has been offered on the basis of the information given that was not accurate, the place may be withdrawn. Where in the School's view there is any attempt to provide deliberately false or misleading information, the School reserves the right to recover any additional costs and expenses incurred. If any one or more of the admission criteria used by the School are held to be unlawful / invalid (Invalid Criteria) this will not impact any other of the admission criteria used by the School. In addition, the School may at its discretion apply any alternative criteria to the Invalid Criteria which in the School's view is most similar to the Invalid Criteria (provided this alternative criteria is lawful and valid). Data about you and your children may be processed by the School. A copy of the Schools data privacy statement can be found on the Schools website. 		
<p>Disclaimer: Places will be allocated on the accuracy of the information provided. The school reserves the right to verify the accuracy of that information and, if it is subsequently discovered that a place has been offered on the basis of the information given that was not accurate, the place may be withdrawn.</p>		
<p>I confirm to the best of my knowledge, all the above information is correct.</p>		
<p>Parent/Guardian Signature:</p>		
<p>Please print name in capital letters:</p>		
<p>Date:/...../.....</p>		

Part C: Rabbi's Reference Form
To be completed by an Orthodox Rabbi(s)

Dear Rabbi(s),

Due to the current Code of Practice with regards to the admissions process for Faith Schools, we are requesting your help in assessing the suitability of the above-mentioned applicant and Parent/Guardian for a place at our school.

Please answer the following questions about the Parent/Guardian of the applicant.

<p>TO BE COMPLETED BY THE COMMUNITY RABBI OR A RABBI WHO KNOWS THE PARENT/GUARDIAN</p>	<p>1. How long have you known this family?</p> <p>2. In what capacity do you know this family? (tick as appropriate.) Halachic questions [], Attendance in shul [], Communal life []</p> <p>If there is other information that BSPS should be aware of, relevant to the questions asked, please provide the detail here: (a supplementary page can be added)</p> <p>.....</p> <p>.....</p> <p>I confirm that, to the best of my knowledge, the above information is correct and accurate.</p> <p>Signature: Date:/...../.....</p> <p>Print name of Rabbi:</p> <p>Synagogue/Communal institution:</p> <p>Phone number:..... Email:.....</p>
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<p>IF YOUR COMMUNITY RABBI CANNOT COMPLETE ALL OF QUESTION 2 ABOVE, PLEASE USE THESE ADDITIONAL SECTIONS, FOR ALTERNATE ORTHODOX RABBIS TO COMPLETE</p>	<p>1. How long have you known this family?</p> <p>2. In what capacity do you know this family? (tick as appropriate.) Halachic questions [], Attendance in shul [], Communal life []</p> <p>I confirm that, to the best of my knowledge, the above information is correct and accurate.</p> <p>Signature: Date:/...../.....</p> <p>Print name of Rabbi:</p> <p>Synagogue/Communal institution:</p> <p>Phone number:..... Email:.....</p>
	<p>1. How long have you known this family?</p> <p>2. In what capacity do you know this family? (tick as appropriate.) Halachic questions [], Attendance in shul [], Communal life []</p> <p>I confirm that, to the best of my knowledge, the above information is correct and accurate.</p> <p>Signature: Date:/...../.....</p> <p>Print name of Rabbi:</p> <p>Synagogue/Communal institution:</p> <p>Phone number:..... Email:.....</p>

PLEASE SEND THE COMPLETED FORM TO: THE SCHOOL ADMISSIONS SECRETARY AT

BEIT SHVIDLER PRIMARY SCHOOL, 261 HALE LANE, EDGWARE, HA8 8NX admissions@beitshvidler.org.uk