Year 7 Certificate of Religious Practice (CRP) 2026-27

4 points are needed to fulfil the requirements of this CRP. There is no advantage in achieving more than 4 points.

Child's surname		Child's first name(s)	
Date of birth		Child's Hebrew name	
Full postal address			
Telephone number			
Email address			
Name of current Primary School			

Points can be obtained through sections 1-4. For Section 1, you must register with the synagogue you propose that you, the child, the child's other parent / guardian to attend, as well as completing this form. Registration can be made by email or online: see synagogue website. If attendance at more than one shul is to be counted for the purpose of school admission, then you must arrange attendance at the shul you are visiting. – please see our FAQ document for guidance as to how to do this www.theus.org.uk/crp

You should send a completed copy of this form to the school to arrive no later than 31st October 2025.
If the form is not received in time, it may not be possible to treat the child as a religious practice priority applicant.
In order to obtain points, the parent/guardian must complete this form and take, or send, it to the person(s) referred to in sections 1-4, or where appropriate provide a letter or certificate. **This form must be completed regardless of sibling status.**

The school cannot consider a CRP which does not have the relevant declarations and it is the responsibility of the parent/guardian to approach the relevant person(s) to obtain a letter of confirmation if they are unable to have parts of the form signed.
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.

SECTION 1 SYNAGOGUE ATTENDANCE Between 25th April 2025 and 25th October 2025 for Year 7 applications or Jan 2026 for Sixth Form applications

Since 25th April 2025 how many times has the child attended Friday night or Shabbat morning synagogue religious services?

In some US shuls, points for attendance at shul can now be collected on either a Friday night or Shabbat morning service. Please check with your chosen shul on their particular provision and details on how to register. Attendance can ONLY be recorded for one service per week.

Dates of attendance need to be verified by the Rabbi or authorised official of each synagogue attended, either by completing the declaration below or by attaching a signed letter. You should refer to the relevant synagogue website for more details about service times and locations.

Please tick **one** box only

☐ Attended at least 8 times (4 points) ☐ Attended at least 4 times (2 points) ☐ Attended less 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 on Friday night or Shabbat morning synagogue services from 25th April 2025

2025 25th or 26th April 2nd or 3rd May 9th or 10th May 16th or 17th May 23rd or 24th May 30th or 31st May	6th or 7th June 13th or 14th June 20th or 21st June 27th or 28th June 4th or 5th July 11th or 12th July	19th or 20th July 26th or 27th July 2nd or 3rd August 9th or 10th August 16th or 17th August 23rd or 24th August 29th or 30th August	5th or 6th Sept 12h or 13th Sept 19th or 20th Sept 26th or 27th Sept 3rd or 4th Oct 10th or 11th Oct	17th or 18th Oct 24th or 25th Oct 31st Oct or 1st Nov 7th or 8th Nov 14th or 15th Nov 21st or 22nd Nov 28th or 29th Nov	5th or 6th Dec 12th or 13th Dec 19th or 20th Dec 26th or 27th Dec **2025** 2nd or 3rd Jan 9th or 10th Jan

Note: For late or in-year applications, arrangements for registering and recording attendance on Friday night or Shabbat morning religious services should be made directly with your synagogue.

Declaration by Rabbi/Synagogue Official:
I confirm that to the best of my knowledge and belief the information in Section 1 is correct. (Please complete the table below for one of the following options. A signature is not required if you have a letter provided from the United Synagogue CRP Attendance system.)

Option 1	Signature		Name and position of signatory	
	Date		Address of signatory	
Option 2	United Synagogue CRP Attendance letter provided, see attached – please tick the box			☐

SECTION 2. JEWISH EDUCATIONAL ACTIVITIES. Between 1st November 2024 and 31st October 2025

Have you, the child's other parent/guardian or the child participated in Jewish educational activities (e.g. nursery or Jewish adult education) on at least **six** occasions?

Please tick one box only ☐ Yes (2 points) ☐ No (0 points)

If Yes please specify activities (e.g. nursery; educational programme) and frequency……

Declaration by Headteacher/Teacher/Course Leader/tutor:
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/School etc		Postcode	

Note: A non-exhaustive list of educational opportunities can be found on the United Synagogue's website: www.theus.org.uk

SECTION 3. VOLUNTEERING. Between 1st November 2023 and 31st October 2025

Have you or the child's other parent/guardian participated in a voluntary capacity in a Jewish communal, charitable or welfare activity on **at least 12 occasions**?

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. For example, a non-exhaustive list of some volunteering opportunities can be found on www.theus.org.uk/category/us-chesed*

SECTION 4: Tribe CRP JUDAISM COURSE 2025

Courses will take place between June-July 2025

The Tribe CRP Judaism Course is now an in-person course running in a number of locations.

This course has been specifically designed for admission to schools whose religious authority is the Office of the Chief Rabbi or whose Foundation Body is the United Synagogue, for admission in September 2026. Applicants who wish to establish religious practice priority to these schools can choose to accumulate points for the CRP in any way they wish and this course would accrue 2 points. The course is open to all applicants and consists of 6 sessions of 45 minutes, involving both child and parent(s)/guardian(s), covering topics relevant to Jewish customs and practices, festivals, kashrut, etc. All of them need to be completed in order to satisfy this section.

For course locations, dates and registration information go to https://www.tribeuk.com/article/crp-2025
If you require further information or support please contact the Tribe office 020 8343 5656

Declaration by United Synagogue

I confirm that the above named person took part in the Tribe CRP Judaism course. Please complete the table below for one of the following options. A signature is not required if you have a certificate provided from Tribe.

Option 1	Signature		Name of course leader	
Option 2	Certificate provided, see attached – please tick box			☐

SECTION 5. FOR CHILDREN OF OTHER FAITHS

Religion of child/family:

To be completed by the Religious Leader giving the reference			
The parents are known to me	Yes/No	The child is known to me	Yes/No
The child is a member of a practicing family	Yes/No	I support this application	Yes/No
Declaration by Religious Leader: I confirm that the above statements about the child named above and his/her family are true to the best of my knowledge and belief			
Name:		Signed & date:	
Position:		Name of Religious Centre:	

Section 6. Parent/Carer declaration: I confirm that the above information is correct	
Parent's Name:	Signed:
Date:	Relationship to child:

For School use only

Date received ……

Name (please print)…… Parent/ Guardian

Total number of points…….. **Child meets Practice Threshold for prioritisation: YES / NO**