

APPLICATION FOR ADMISSIONS

SUPPLEMENTARY INFORMATION FORM FOR SECONDARY TRANSFER

STUDENT	ADDRESS
Legal Surname:
Forenames: (as per birth certificate) Post Code:
Date of Birth:	Home Telephone No:
Is your child applying outside his normal age group? Yes / No	Local Authority:

Please give details of the person who has legal responsibility for this student. Please note that only one person with legal responsibility is required to complete this form.

PARENT/GUARDIAN	
Surname: Title:	Home Tel:
Forename:	Daytime Tel:
Home Address: (if different from above)	Mobile:
Postcode:	Email:

Statement of the School's Religious Nature

As a faith school, and in accordance with the School Admission Code, we prioritise Orthodox Jewish boys if the school is oversubscribed. Governors trust that parents who have chosen this school for their son have done so knowing it is an Orthodox Jewish school and they hope parents will give their full support to its distinctive orthodox Jewish practices.

Synagogue attended:
Name of the Rabbi: His Telephone Number:
His Postal Address:
His e-mail (if known):
The name and telephone number of an Orthodox Jewish Rabbi who will complete the rabbi reference form (if different from above):
Name of the Rabbi: His Telephone Number:
His Postal Address:
His e-mail (if known):

Additional Documentation: To be considered under the religious criteria of the school, a rabbi reference form must also be completed by you and your family rabbi and returned to the school under separate cover. This form can be found on the school's website.

In accordance with our Oversubscription Criteria:

1. Is the student an only or eldest child (please tick only one)?

No, my child is not the eldest child in the family

Yes, my child is an only child

Yes, my child is the eldest in the family

My child is not the eldest in the family but we wish him to be given eldest child priority due to the fact that his eldest sibling has an EHCP and attends another school due to his/her special educational needs. His sibling attends _____ (name of specialist provision school)

2. Siblings: Please provide details of a sibling who attends either Hasmonean High School for Boys or Hasmonean High School for Girls at the time of application.

Name _____ Current Year Group _____

3. Former siblings: Please provide details of any siblings who have previously attended either Hasmonean High School for Boys or Hasmonean High School for Girls or the former Hasmonean High School.

Name _____ Year left _____

OTHER INFORMATION

The School Admission Code prioritises children who are in care under the provision of the Education (Admission of Looked After Children) (England) Regulations 2006. This includes formerly 'looked after' children who have been adopted or made subject to a residence or special guardianship order, as well as children who were in state care outside of England and ceased to be in state care as a result of being adopted. (Please refer to the school's Admissions Criteria for more details.) If you are applying under this provision please tick this box.

The School Admission Code prioritises children with an Education Health and Care Plan (EHCP). If you are applying under this provision please tick this box.
(Your child's application will go through a consultation process with the Local Authority rather than the normal admissions process.)

If you are applying under Criterion 2 on exceptional social or medical grounds please tick this box and attach the relevant form and evidence from a suitably qualified professional or professionals.

To the best of my knowledge all the above information is correct.

Please note: Places will be allocated in reliance 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 strength of information that was not accurate, the place may be withdrawn.

Signature of Parent/Guardian **Date:**

Please return completed form to:
Admissions Officer, c/o Hasmonean High School for Boys, Holders Hill Rd, London NW4 1NA

If you require confirmation of receipt of your application, please tick this box.
Confirmation will be sent via email after both this form and the rabbi reference form are received.