

King David Primary School

250 Alcester Road, Moseley, B13 8EY

Tel: 0121 449 3364

Website: www.kingdavid.org.uk

enquiry@kingdavid.bham.sch.uk

Headteacher: Miss Nina Capek



Declaration of Practice of Faith

For Jewish applicants

Name of pupil: _____

Date of Birth of Pupil: _____

King David School is an Orthodox Jewish Primary School. We expect all families to respect and support the ethos of the school. The Admissions Policy gives priority to Jewish children. For the purposes of school admissions, a child is accepted to be Jewish if “Yes” is truthfully answered to one of the following three categories. For Sections 1 and 3, the signature of an appropriate person is required. To confirm Section 2, a home visit by a member of the school staff may take place.

If there is any uncertainty regarding aspects of this form, parents are urged to contact the school. The school’s Rabbi is Rabbi Jacobs, who administers over Singers Hill and Moseley Shuls. The Rabbis of Central, Solihull and Progressive Shuls have also agreed to sign the declaration in Section 1 when appropriate.

1 Synagogue attendance

In the past 12 months, have you or your child attended synagogue services (including those for children), either for the High Holydays, or on three other occasions during the year?

- ☐ Yes – High Holydays or ☐ Yes – regular services, 3 or more times in the year
☐ No

Rabbi’s Declaration: I confirm that to the best of my knowledge and belief, the information in Section 1 is correct.

Signed: _____ Name of Rabbi: _____

Date: _____ Synagogue: _____

2 Mezuzah

Do you perform the Mitzvah of Mezuzah by ensuring one is affixed to the front door of your home?

- ☐ Yes ☐ No

3 Voluntary activity

Prior to the date of application, have you acted in a voluntary capacity in any Jewish communal, educational, charitable or welfare activity?

☐ Yes ☐ No

Jewish Activity Organiser's Declaration: I confirm that to the best of my knowledge and belief, the information in Section 3 is correct.

Signed: _____ Name: _____

Date: _____ Organisation: _____

Organisation's address: _____

Postcode: _____

Parent or guardian declaration

I confirm that the above information is correct. As at least one of the sections above is shown as "Yes", I wish my child to be classified as Jewish according to the Admissions Policy.

Signature of parent: _____ Date: _____

Father / Mother / Guardian (please indicate)

For school use only

Date received: _____ Child meets Practice threshold: Yes / No