Nursery and Reception Certificate of Religious Practice (CRP) 2026-27

4 points are nee	ded to fulfil the req	uirements of this C	RP. There is no adva	ntage in achieving n	nore than 4 points.
Child's surname			Child's first name(s)		
Date of birth			Child's Hebrew name	2	
Full postal address					
Telephone number					
Email Address					
If the form is not recommend in order to obtain poor or where appropriate. The school cannot comproach the relevant person cannot vouch for the SECTION 1 SYNA Since 25th April 2025 morning synagogue	neived in time, it may not bints, the parent/guard e provide a letter or ce consider a CRP which don't person(s) to obtain a (s) may decline to sign e parent/guardian or the company of the company times have religious services?	ot be possible to treat ian must complete this rtificate. This form must complete this relevance is not have the relevance this form where the rechild. ICE. Between 25 th Act a you or the child's other constants.	arrive no later than 15 th the child as a religious possion and take, or send ast be completed regard ant declarations and it is if they are unable to haparent/guardian or the aparent/guardian or the aparent/guardian, or	ractice priority applicant it to the person(s) references of sibling status. It is the responsibility of the person of the form significant is not personally the child attended Frice.	erred to in sections 1-4 the parent/guardian to gned. known to them and/o
			ected on either a Friday of tails on how to register.	-	-
			ed official of each synago r to the relevant synago		
Please tick one box o	only				
	st 8 times (4 points)	☐ Attended at le	ast 4 times (2 points)	☐ Attended less	than 4 times (0 points)
Synagogues	•	re required to decline	premises. to record attendance on or Shabbat morning syn		PE th April 2025
		dice on i iluay ingile	Ul Silabbat illorining 37	agugue services iroin .	
2025	6 th or 7 th June	10th and 10th links	Eth an Cth Cant	17th 10th O-+	Eth au Cth Dan
25 th or 26 th April	13 th or 14 th June	18 th or 19 th July 25 th or 26 th July	5 th or 6 th Sept 12 th or 13 th Sept	17 th or 18 th Oct 24 th or 25 th Oct	5 th or 6th Dec 12 th or 13 th Dec
2 nd or 3 rd May	20 th or 21 st June	1 st or 2 nd August	19 th or 20 th Sept	31st Oct or 1st Nov	19 th or 20 th Dec
9 th or 10 th May	27 th or 28 th June	8 th or 9 th August	26 th or 27 th Sept	7 th or 8 th Nov	26 th or 27 th Dec

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.

3rd or 4th Oct

10th or 11th Oct

14th or 15th Nov

21st or 22nd Nov

28th or 29th Nov

2026

2nd or 3rd Jan

 9^{th} or 10^{th} Jan

15th or 16th August

22nd or 23rd August 29th or 30th August

16th or 17th May

23rd or 24th May 30th or 31st May

Note:

4th or 5th July

11th or 12th July

Declaration by Rabbi/Synagogue Official:

I confirm that to the best	t of my knowledge and be	elief the information	in Section 1 is correct	t. (Please complete th	ne table below for one
of the following options.	A signature is not require	ed if you have a lette	r provided from the L	Jnited Synagogue CRI	P Attendance system.)

of the follow	ing options. A sig	nature	e is not required if you have a le	tter provided from the United	i Synagogi	ue CRP Attendance system.)
Option 1	tion 1 Signature			Name and position of signatory		
	Date	te Address of signatory				
Option 2 United Synagogue CR		gue CR	RP Attendance letter provided, so	P Attendance letter provided, see attached – please tick the box		
SECTION 2	. JEWISH EDUC	ATIO	NAL ACTIVITIES. Between 1	1 st November 2024 and 15	5 th Janua	ry 2026
	e child's other pa n at least six occa	_	guardian or the child participate ?	d in Jewish educational activit	ies (e.g. n	ursery or Jewish adult
Plea	ase tick one box o	only	☐ Yes (2 points) ☐ No (0 points)			
If Yes ple	ase specify activit	ties (e	e.g. nursery; educational progran	nme) and frequency		
	-		ner/Course Leader/tutor: owledge and belief the information	on in Section 2 is correct	T	
Signature				Name and position of signatory		
Date				Address of signatory		
Name of Course/ Institution/School etc				Postcode		
Note: A nor	า-exhaustive list c	of educ	cational opportunities can be fou	und on the United Synagogue's	s website:	www.theus.org.uk
SECTION 3	VOLUNTEERI	NG. B	Between 1 st November 2023	₹ and 15 th lanuary 2026		
Have you or on at least 1. This voluntee Synagogue H	the child's other 2 occasions ? ering cannot included lead Office or the	parent ude an	t/guardian participated in a volu nything that benefits, either finar e of the Chief Rabbi, but can incl uggestions, please see the FAQs.	untary capacity in a Jewish con ncially or practically, the school lude volunteering for an indivi	ol you are	applying to, the United
Please	tick relevant box		☐ Yes (2 points)	☐ No (0 points)		
If Yes, p	please specify nar	me of	organisation and give a brief de	scription:		
•••••						
	-		Charitable/Welfare Organisation owledge and belief the information			
Signature						
Date			Address of signatory			
Name and A				Postcode		

Notes: If these 12 occasions have included more than one organisation, please attach further declaration(s) to this form.

SECTION 4: US/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, for parent(s) or 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	ption 2 Certificate provided, see attached – please tick box			x			
SE	ECTION 5. PAREN	IT'S/GUARDIAN'	S DECLARATION					
I confirm that all the information provided is correct								
Name (please print)								
Si	Signed Date							
For School use only								
Date received								
Name (please print)								
Total number of points Child meets Practice Threshold for prioritisation: YES / NO								
ECTION 6: Emergency Additional Option his section will only be available for use following authorisation by the Chief Rabbi in the event of a national emergency prohibiting shul ttendance. This section will only be valid and should only be completed in such circumstances.								

Please tick one box only

If, during the period specified above for attendance at synagogue, the synagogues are open for services, the requirements of these admission arrangements relating to in person attendance of services at synagogue will apply. In the event that, during the period specified above for attendance at synagogue, the synagogues have been closed for services, the requirement of these admission arrangements relating to in person attendance at synagogue will not apply.

If that is the case, please complete the following section:

Online Synagogue Services: Between 25th April 2025 and 10th January 2026

How many times have you, the child's other parent/guardian, or the child attended internet-based synagogue services on Friday evenings (Kabbalat Shabbat) or the eve of festivals? Online participation must not be on Shabbat or Chagim. Online Synagogue services are selfcertified, please complete the section below.

Please list the online atten	dances:	
Date: Date:	Host organisation: Host organisation:	Officiant or leader Officiant or leader
Date:	Host organisation:	Officiant or leader
Date:	Host organisation:	Officiant or leader

At least 4 times (2 pts)
Less than 4 times (0 pt)