



Yavneh

College

Sixth Form

Hillside Avenue

Borehamwood

Hertfordshire

WD6 1HL

020 8736 5580

YAVNEH COLLEGE
An Academy
SIXTH FORM
September 2018

Supplementary Information Form

1. All parents/carers or students seeking a priority place at Yavneh College Sixth Form in September 2018 should complete this Supplementary Information Form (SIF).
2. Please find enclosed with this SIF the Yavneh College Certificate of Religious Practice which must be completed and submitted together with this SIF as part of the application process in order to determine whether or not an applicant meets the Religious Practice requirements of Yavneh College.
3. This SIF and Certificate of Religious Practice should be completed and returned to Yavneh College by the deadline of 31 January 2018.
4. Please email the school office at admissions@yavnehcollege.org for receipt of this form to be acknowledged.



Please complete the following application form in black ink in block capitals.

Child's surname:		
Child's forename(s):		
Child's date of birth:		
Child's address:	Postcode:	
Has the child lived at any other address within 10 miles of the School in the last 18 months? If yes, please provide the address(es). Do you still own or lease any of those properties? Please provide evidence that all ties with any previous addresses where the child has lived at within 10 miles of the School in the last 18 months have been relinquished, such as evidence of sale or termination of a tenancy agreement.		
Full Name of parent/carer:		
Parent's/carer's telephone number/s:	Home	Mobile
Parent's/carer's email address:		
Child's current school:		
If correspondence should be sent to another address in addition to that noted above, please indicate:	Name: Address:	Postcode:

<p>If you have another child who is currently a pupil at Yavneh College, and will still be a pupil in September 2018, please state their full name, date of birth and current school year.</p>	<p>Name:</p> <p>Year:</p> <p>DOB:</p>
<p>If you have another child who was formerly a pupil at Yavneh College, please state their full name, date of birth and the dates they started and left Yavneh College.</p>	<p>Name:</p> <p>DOB:</p> <p>Start date: _____ Leaving date: _____</p>

<p>Supporting Documentation: Certificate of Religious Practice Please complete and submit the Yavneh College Certificate of Religious Practice with this SIF.</p>			
<p>Declarations:</p>			
<p>1.</p>	<p>I have read the document describing the Jewish Ethos of Yavneh College and confirm that I respect this Ethos and its importance to the school community.</p>	<p>Signature:</p>	
		<p>Name:</p>	
		<p>Date:</p>	
<p>2.</p>	<p>I wish the above applicant to be considered for a place as a pupil at Yavneh College and declare that the above information is true and correct in every detail. I understand that if a place has been obtained on the basis of a fraudulent or intentionally misleading application and the place would not have been offered had the information been correct or accurate, the offer may be withdrawn.</p>	<p>Signature:</p>	
		<p>Name:</p>	
		<p>Date:</p>	
<p>3.</p>	<p>I have enclosed a completed Yavneh College Certificate of Religious Practice.</p>	<p>Signature:</p>	
		<p>Name:</p>	
		<p>Date:</p>	
<p>Please return this Supplementary Information Form and the Yavneh College Certificate of Religious Practice to: Mrs F Graham, Admissions Officer, Yavneh College, Hillside Avenue, Borehamwood, Hertfordshire WD6 1HL by: 31 January 2018. For confirmation of receipt within ten working days, please telephone 020 8736 5580 or email admissions@yavnehcollege.org</p>			
<p>For office use only:</p>			
<p>Date form received:</p>		<p>Ref.no:</p>	
<p>Additional information included with application:</p>		<p>email sent:</p>	