

2201 East 23rdStreet, Brooklyn, NY 11229 TEL:347-462-2445

info@ateresnaava.net

RABBI ZECHARIAH WALLERSTEIN, FOUNDER

RABBI YISROEL GROSSBERG, DEAN

MRS. DAPHNE HANSON, ADMINISTRATOR

# SECTION 1- PERSONAL INFORMATION

Last Name First Middle Initial Hebrew Name

Street Address Apt.# City State Zip

Home Phone Student’s Cell Phone E-mail

Social Security# Date of Birth Place of Birth

# SECTION 2- EDUCATION

Elementary Schools

High Schools

College/Seminary Programs High School Hebrew Average English Average

List any awards, scholarships, etc. that you have received. How did you spend the last three summers? List any organizations in which you have been active during the past four years and any positions that you have held.

List extra-curricular activities, hobbies, special abilities. Are you applying for Seminary with College track, or just Seminary? If college track, which major are you interested in?

What are your afternoon plans for the upcoming year if not in college track? Please indicate your knowledge in the areas listed below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Excellent | Good | Beginner | Excellent Good Beginner |
| Jewish History |  |  |  | Rashi’s Commentary |
| Prayer |  |  |  | Hebrew Language |
| Halacha/Jewish Law |  |  |  | Tanach/Bible |

Have you ever sustained any serious injury or suffered a serious illness? If yes, please give details:

YES NO

Have you ever undergone psychological treatment or professional counseling ofany type? YES NO

If yes, please givedetails:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Are you currently taking medication? | YES | NO | If yes, please give details: |  |
| **SECTION 3 - PARENT INFORMATION** |  |  |  |
| Father’s Name | Address |  | Home Phone | Cell Phone |
| Occupation | Business Address |  | Business Phone | Education/HS, Yeshiva, College |
| Mother’s Name | Address |  | Home Phone | Cell Phone |
| Occupation | Business Address | Business Phone | Education/HS, Yeshiva, College |
| Family Synagogue | Parents’ Marital Status | Number of Siblings |  |
| **SIBLINGS** |  |  |  |  |  |
| Name | Age | School/Occupation | Name | Age | School/Occupation |
| Name | Age | School/Occupation | Name | Age | School/Occupation |
| Name | Age | School/Occupation Name | Age | School/Occupation |
| Reference Name: |  | Phone: | Name: | Phone: |  |

In order to gain a more complete understanding of our applicants, we request that you write a statement including your personal history, attitudes towards Judaism, future goals and any other information that you feel would be helpful to us in considering your application. Please use a separate sheet of paper.

I hereby submit my application to Ateres Naava and undertake to comply with all rules, regulations, and standards set by the school. I certify that all the statements made in this application are complete and accurate to the best of my knowledge. Should I leave early I understand that I will still be held accountable for the full amount of the year’s

tuition, unless otherwise mutually arranged.

Signature Date

PLEASE NOTE RECEIPT OF APPLICATION DOES NOT GUARANTEE ACCEPTANCE. UPON RECEIPT OF YOUR COMPLETED APPLICATION, ALONG WITH THE OTHER REQUESTED ITEMS YOU WILL BE CONTACTED TO ARRANGE AN INTERVIEW.

TUITION FOR THE 2012-2013 SCHOOL YEAR IS$6500.00

Please submit your completed application form with the following items:

1. Two passport size photographs
2. Two letters of recommendation
3. Your official High School and/or Seminary transcripts
4. $100.00 non refundable application fee payable to Ateres Naava
5. $500.00 non refundable registration fee after acceptance

If you are applying for the college track, there will be a separate college fee and application.

APPLICATIONS SHOULD BE SENT TO:

ATERES NAAVA 2201 E. 23RDSTREET BROOKLYN, NY 11229