



Application for Admission

Rabbi Oscar Z.

Fasman Yeshiva High School

7135 North Carpenter Road, Skokie, Illinois 60077

(847) 982-2500 FAX (847) 674-6381 www.HTC.edu

Preparatory Division of

בית המדרש לתורה

HEBREW THEOLOGICAL COLLEGE

For Office Use Only

Received: _____

Fee: _____

How to Apply

- Application and Fee.** A check or money order (no cash, please) for the non-refundable application fee of \$75 must accompany your completed application form. Attach additional sheets if you require more room to answer any of the questions on the application, or wish to include additional information about the applicant.
- Request for Transcripts.** Submit requests to the records office of the school(s) the applicant has attended for the past three years to send complete official transcripts directly to the Committee of Admissions at the above address.
- Letters of Recommendation.** Two letters of recommendation from rabbis and/or teachers who know the applicant well and can comment on his aptitude for study at Fasman Yeshiva High School.
- Photograph.** Please attach a recent photograph of the applicant in the box at right.
- Personal Interview.** Candidates for admission will be invited with their parents for a personal interview with a representative of the Admissions Committee. The Office of Admissions usually arranges the interview after the candidate's application and supporting documents have been received.
- Medical Form.** All students must submit a completed medical form before registering for any classes.

Attach photograph here

No application will be considered by the Rabbi Oscar Z. Fasman Yeshiva High School Admissions Committee prior to the completion of each of the items listed above.

Special Notes

- Campus visit.** Applicants and their parents are invited to visit the Yeshiva at any time during the year. Contact the Office of Admissions to arrange a tour.
- Financial Aid.** Applicants who wish to be considered for financial aid must complete a separate Application for Financial Assistance available upon request from the Hebrew Theological College Financial Aid Office.

Application for Admission

מתיבתא דבית המדרש לתורה
Fasman Yeshiva High School
7135 North Carpenter Road, Skokie, Illinois 60077
(847) 982-2500 FAX (847) 674-6381 www.HTCnet.edu

1. For admission to Fasman Yeshiva High School in: Fall 20____
 Spring 20____

2. Highest school grade completed as of June of current academic year. (Check one only)
 8 9 10

3. Student Name _____
(Please Print) Last First Middle

4. Social Security Number _____ 5. Hebrew Name _____

6. Home Address _____
Number and Street Apt.

City State Zip Code 7. Telephone (_____) _____

8. Parents' Email address _____ Parent's Cell Phone (_____) _____

9. Date of Birth _____ 10. Place of Birth _____
Month/Day/Year City/State or Country

11. Of what country are you a citizen? _____ 12. How long have you resided in the United States? _____ years _____ months

13. Are you applying for financial assistance from Fasman Yeshiva High School? Yes No
(Applicants for financial assistance must complete a separate application.)

14. Where do you expect to live while attending the Yeshiva? at home in dormitory

15. Father's name _____
Last First
Hebrew _____

Mother's name _____
Last First
Maiden Hebrew _____

Parent's marital status: Married Separated Divorced

Father living Father deceased

Mother living Mother deceased

Highest degree attained _____

Highest degree attained _____

Occupation _____

Occupation _____

Employer _____

Employer _____

Address _____

Address _____

Business Telephone _____
Area Code

Business Telephone _____
Area Code

16. If you live with a guardian, give his or her name, address, occupation and relationship to you

17. List the names and ages of your siblings

18. Names of close relatives who have attended Hebrew Theological College and their years of attendance

19. What languages are spoken in your home? _____

20. List chronologically all the schools you have attended.

School Name	Location (City and State)	Attended (From-To)	Graduation Date
Elementary School:			
Secondary School			
Jewish Schools (if not included above)			

21. Describe the extent of your Jewish education:

	None	Minimal	Average	Good		None	Minimal	Average	Good	In Original	In Translation
Hebrew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Customs and Ceremonies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaking ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Bible Commentaries	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mishna	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gemara	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. What scholarships, prizes or awards have you received both in and out of school? _____

23. List your major extracurricular activities both in and out of school and offices held, if any. _____

24. Describe your activities in recent summers (camp, travel, work, etc.) _____

25. Have you ever applied to or attended this or any other Yeshiva High School before? Yes No If yes, give details _____

26. Family Congregational affiliation: Name of Congregation _____
 City Telephone Rabbi's Name

27. List two persons (one preferably a rabbi) who can serve as character references.
 Name _____ Phone _____
 Address _____
 Name _____ Phone _____
 Address _____

28. Write a statement describing why you are undertaking a Yeshiva program. (How long you have thought of one; with whom you have discussed it, etc.) Use additional paper, if necessary.

29. NO STUDENT IS ACCEPTED WITHOUT MEDICAL/HOSPITALIZATION INSURANCE. Every student residing in the dormitory on a full-time basis must also enroll in the HTC Group Insurance Plan to cover minor emergencies. The Plan is optional for non-dorming or part-time-dorming students.

Name of insurance company _____ Policy number _____

I am also applying for HTC Group Insurance

30. Do you have any physical or learning disabilities, or emotional problems that may affect your studies?

Yes No If yes, give details:

Attendance at Rabbi Oscar Z. Fasman Yeshiva High School is dependent upon the maintenance of regular and satisfactory work. Each student is required to become familiar with and abide by all the rules and regulations of Rabbi Oscar Z. Fasman Yeshiva High School.

RABBI OSCAR Z. FASMAN YESHIVA HIGH SCHOOL RESERVES THE RIGHT TO REQUIRE THE WITHDRAWAL OF ANY STUDENT AT ANY TIME FOR ANY REASON WHICH IT DEEMS TO BE SUFFICIENT, AND NO REASON FOR REQUIRING SUCH WITHDRAWAL NEED BE GIVEN.

Signature of Applicant

Date

Signature of Parent of Guardian

An application cannot be accepted without a parent or guardian's signature.