

NORTH SHORE HEBREW ACADEMY

ישיבת חוף הצפון

Recent
Picture
of
Applicant

APPLYING FOR _____ GRADE

APPLICATION FOR ADMISSION TO NORTH SHORE HEBREW ACADEMY

We hereby submit our application for our child's admission to NSHA for the academic year commencing 20_____. We understand that the Academy's course of study reflects a commitment in Jewish and Secular studies, combined with a commitment to the values and traditions of Halachic Judaism, and are fully aware of the Academy's commitment to Torat Yisrael, Am Yisrael and Eretz Yisrael. We agree to share and support the Academy's philosophy and policies.

BASIC INFORMATION

Please print all information

Student's Name to be used in school (Last) _____ (First) _____

Student's Date of Birth _____ Male Female

Father's Title and Name _____ Mother's Title and Name _____

Home Address _____ Zip _____ Home Phone _____

Father: () ()
Cell Phone # Business Telephone # E-mail Address

Mother: () ()
Cell Phone # Business Telephone # E-mail Address

Applications for students applying to all grades must be accompanied by a **\$150.00 application fee**. Students applying for kindergarten - grade 8 must also include a **\$200.00 testing fee**. Checks made payable to North Shore Hebrew Academy. Application and testing fees are **non-refundable**.

Please continue to fill out the application form on the next pages.

FOR OFFICE USE ONLY

Date Received _____ Initial _____

Cash Check # _____

TESTING DATES:

Psychological Evaluation _____

Hebrew Test _____ Examiner _____

Birth Certificate # _____ City/State _____

CANDIDATE FOR GRADE:

Hebrew _____ General Studies _____

#16 (All documents have been submitted)

POST EVALUATION

Accepted

Pending

Not Accepted

CONDITIONS: _____

Date: _____ Principal _____

Business Office _____

STUDENT INFORMATION:

Student's Hebrew Name _____
(last) (first) (middle)

Child born before sunset or after sunset Place of Birth: _____

Language(s) spoken in the home _____ If foreign born, date of arrival in U.S.A. _____

PREVIOUS EDUCATION: (please list from Nursery)

Name of School	Grade	Address of School	Dates of Attendance (from to)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Reason for transferring to N.S.H.A.

What is the child's most pronounced interest? (describe)

What are the child's leisure activities?

Is the child receiving any therapy - PT, OT, Speech, Special Education services?

Has the child experienced any serious illness or accident? (Give dates and nature of illness or accident)

Additional information on child's behavior, habits and attitude:

Religious background of the home. (Kindly state here the attitude of the family with respect to religious observances such as Shabbat, Holidays, Dietary Laws, etc.)

Brothers/Sisters Name	Date of Birth	Age	School	Grade

Brothers/Sisters Alumni of NSHA Name	Year Graduated	Presently

PARENT INFORMATION

	FATHER	MOTHER First Name-Maiden Name
Hebrew Name		
Place of Birth		
If foreign born, date of arrival in U.S.A.		
Congregational Affiliation		
Other Jewish & General Communal Affiliations		
Name of Firm		
Occupation		
Are you an Alumnus of N.S.H.A.? Year Graduated		
If not, what school did you graduate?		

From whom did you obtain information concerning the Academy?

SUPPLEMENTARY DOCUMENTS TO APPLICATION

To facilitate the processing of your child's application, you MUST furnish us with the following information BEFORE THIS APPLICATION CAN BE CONSIDERED.

THESE ITEMS MUST ACCOMPANY THIS APPLICATION:

We will be unable to process this application without the following:

- (1) An original Birth Certificate.
- (2) Recent photograph attached to application.
- (3) \$150.00 Application Fee (check made out to NSHA), non-refundable.
- (4) \$200.00 testing Fee (check made out to NSHA), non-refundable. (for applicant applying for Kindergarten-Grade 8)
- (5) Last term's report card (if applicable) Hebrew General Studies
- (6) Last term's Achievement Score records (if applicable).

THE FOLLOWING ITEMS MUST BE COMPLETED AFTER APPLICANT IS ACCEPTED:

Forms will be forwarded to you in an envelope marked "New Student Kit" upon acceptance

(1) Completed and up to date Medical Forms.

(2) Completed School Transportation

(3) MEANS OF TRANSPORTATION

School Bus District _____

Bus No. _____ Stop _____

Parent Pick-up / Car Pool / Student Walks Home

(4) Evidence of child citizenship status (for non-U.S. Citizens).

(5) Evidence of clearance from prior school (if applicable).

(6) _____

OTHER PERTINENT INFORMATION

Father's Signature

Mother's Signature