



Yeshivat Yishrei Lev Application for Admission 5772/2011-2012

Please use the on-line application available at www.yishrei.org. If that is not possible, please fill in this application in full and submit the following:

1. Two recent passport photos
2. Medical Form
3. High School Transcript
4. Two Letters of Recommendation
5. \$100 application fee

Please send the above items to:

American Friends of Yeshivat Yishrei Lev
c/o Yaakov Meir Kranzler
385 Beach 13th st
Far Rockaway, NY 11691

OR Fax to: 206-426-5094

Official Name _____

I'd like to be called _____

Address _____

City, State, Zip _____

Your Cell Phone Number _____

Date of Birth _____

School Attending _____

Shul Attending _____

Father's Name
Rabbi/ Dr./ Mr. _____

Home Address _____

Occupation _____

Business Phone/Fax _____

Business Address _____

Cell Phone _____

Email _____

Hebrew Name _____

Home Phone Number _____

Email _____

Social Security # _____

Passport # _____

Shiur _____

Shul Rabbi _____

Mother's Name (include Maiden Name)
Dr./ Mrs./ Ms./ _____

Home Address _____

Occupation _____

Business Phone/Fax _____

Business Address _____

Cell Phone _____

Email _____

Sibling Information

Name	M/F	Age	School/Grade	Occupation

List one Contact Family (either a relative or family Friend) in Israel, if applicable.

Name	Address	Phone/Cell

What did you do during the summer throughout High School?

8 th grade	9 th grade	10 th grade	11 th grade

What are your plans for this coming summer? _____

Have you ever attended a different High School? If so, which? _____

What are your hobbies, interests, and extracurricular activities? _____

How well can you:

Speak Hebrew? Excellent Good Fair Weak

Understand Hebrew? Excellent Good Fair Weak

Prepare a Gemara? Excellent Good Fair Weak

Which Masechtos/Perakim did you learn in High School?

9 th grade	10 th grade	11 th grade	12 th grade

Please list which Rishonim and Achronim you've learned inside.

Which University do you plan to attend upon your return from Israel? _____

Have you already applied/been accepted? _____

Please list your SAT scores _____

Please describe any special needs/disabilities that you may have, if applicable

In these short lines, please indicate what makes you a qualified candidate for Yishrei Lev?

Signature _____ Parent's signature _____

Please give the attached Recommendation Form to two people familiar with your educational and religious achievements. At least one recommender should be a Rebbe.

For Office Use Only

Date Received: _____ **Processed By:** _____

Date Application Fee Received _____

