

APPLICATION FOR ADMISSION

HEBREW SEMINARY A RABBINICAL SCHOOL FOR DEAF & HEARING

PERSONAL DATA

Legal Name: _____
Last First Middle (complete) Sex

Permanent home address: _____
Number and Street

_____ *City or Town State Zip Country*

e-mail address: _____

If different from the above, please give your mailing address for all admission correspondence:

Mailing address: _____
Number and Street

_____ *City or Town State Zip* Use until: _____ *Date*

Telephone at mailing address: _____ / _____ *Area Code Number* Permanent home telephone: _____ / _____ *Area Code Number*

Birth date: _____ *Month Day Year* Citizenship: U.S. Permanent Resident U.S. Other _____

e-mail address: _____

Will you be a candidate for financial aid? Yes No

EDUCATIONAL DATA

School you attend now _____ Date of entry _____

Mailing address: _____
Number and Street

_____ *City or Town State Zip Country*

School telephone: _____ / _____ *Area Code Number*

List all secondary schools you attended.

Name of School Location (City, State, Zip, Country) Dates Attended Graduation Year

List all colleges you have attended. Please have a transcript sent from each institution as soon as possible.

Name of School Location (City, State, Zip, Country) Dates Attended Graduation Year

If not currently attending school, please check here: Describe in detail, on a separate sheet, your activities since last enrolled.

HEBREW SEMINARY

A RABBINICAL SCHOOL FOR DEAF & HEARING

FAMILY

Mother's full name: _____ Is she living? _____

Home address if different from yours: _____

Occupation: _____

(Describe briefly)

(Name of business or organization)

Name of college (if any): _____ Degree: _____ Year: _____

Name of professional or graduate school (if any): _____ Degree: _____ Year: _____

Father's full name: _____ Is he living? _____

Home address if different from yours: _____

Occupation: _____

(Describe briefly)

(Name of business or organization)

Name of college (if any): _____ Degree: _____ Year: _____

Name of professional or graduate school (if any): _____ Degree: _____ Year: _____

Please give name and ages of your brothers and sisters. If they have attended college, give the names of the institutions attended, degrees, and approximate dates.

ACADEMIC HONORS

Briefly describe any scholastic distinctions or honors you have won in college:

RELIGIOUS BACKGROUND

Jewish upbringing Orthodox Conservative Reconstructionist Reform Other _____

Date of Bar or Bat Mitzvah _____ Length of time studied Hebrew _____

In the space provided below, briefly discuss your observance practices related to Jewish rituals, customs, and holidays:

COMMUNICATIONS PROFILE

Degree of hearing loss Mild Moderate Severe Profound

Primary method of communication Sign language Speech (If speech) Do you sign fluently? _____

(Yes or No)

EXTRACURRICULAR AND PERSONAL ACTIVITIES

Please list your principal extracurricular, community, and family activities and hobbies in the order of their interest to you. Include specific events and/or major accomplishments such as acting roles played, varsity letters earned, etc.

WORK EXPERIENCE

List any job (including summer employment) you have held during the past three years.

*Specific nature
of work*

Employer

*Approximate dates
of employment*

*Approximate no. of
hours spent per week*

In the space provided below, briefly discuss which of these activities (extracurricular and personal activities or work experience) has had the most meaning for you, and why.

PERSONAL STATEMENT

Please discuss why you are interested in studying at the Hebrew Seminary, A Rabbinical School for the Deaf & Hearing. You may use the back of this page and attach extra pages if your essay exceeds the limits of this form.

HEBREW SEMINARY

A RABBINICAL SCHOOL FOR DEAF & HEARING

4435 W. Oakton, Skokie, IL 60076

Voice: 847-679-4113 • fax: 847-677-7945

e-mail: info@hebrewseminary.org • www.hebrewseminary.org