

# SECOND-YEAR PROGRAM

November - April\*

\*Dates subject to slight change

Ramot, Jerusalem

## APPLICATION FOR ADMISSION 2024-2025

### INSTRUCTIONS:

Please complete this application and return to [midreshetmalka@gmail.com](mailto:midreshetmalka@gmail.com).

### PERSONAL

Name: First: \_\_\_\_\_ Last: \_\_\_\_\_

*\*The name and birth date of each parent plus the mother's maiden name and the student's passport number and citizenship must be filled out clearly. This is information is needed to renew student visas.*

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ \*Date of Birth: \_\_\_\_\_

\*Citizenship/s: \_\_\_\_\_ \*Passport #: \_\_\_\_\_

### FAMILY

I live with:  Both parents  Father  Mother  Other \_\_\_\_\_

**Father's Title and Name:** \_\_\_\_\_

Address: (if different than above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Cell: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Email: \_\_\_\_\_

**Mother's Title and Name:** \_\_\_\_\_

Address: (if different than above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Occupation: \_\_\_\_\_ Cell: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Email: \_\_\_\_\_

**I am applying for the\*:**

- Shana Bet Program
- Transitional Program

\*Please check both only if you are unsure which program you would like to participate in next year.

**Please answer the following honestly and to the best of your knowledge. The amount of lines provided indicates the estimate length your answer should be.**

- 1) List 3 hobbies or interests you have.  
\_\_\_\_\_  
\_\_\_\_\_
- 2) List three adjectives that describe you best.  
\_\_\_\_\_
- 3) List some of your strengths and your weaknesses (2-4). How do these impact you in your everyday life, as well as in your work towards your goals?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 4) Why do you think this program is best for your growth?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 5) Why do you think *you* are an asset to this program?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 6) Where are you coming from? (Did you attend a different program last year, etc.)  
\_\_\_\_\_  
\_\_\_\_\_
- 7) Please list two references who know you well and are not family related. Preferably someone who was involved in your previous program and/or someone who knows you and your journey well.

REFERENCE A  
 Name: \_\_\_\_\_  
 Number: \_\_\_\_\_  
 Relation: \_\_\_\_\_

REFERENCE B  
 Name: \_\_\_\_\_  
 Number: \_\_\_\_\_  
 Relation: \_\_\_\_\_

8) How do you think your summer will impact the start of your shana bet?

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9) What do you feel you gained over the past year in your previous program? Why are you looking to transfer? Please be specific.

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Please check one box below:

I would like assistance fundraising to fulfill tuition requirements.

I do not need assistance fundraising to fulfill requirements.

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Signature of Student

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Date

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Signature of Parent(s)

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Date