

DIRECTIONS TO APPLICANT:

1. Detach the last page and give it to your Current principal or guidance counselor to send to Ezra Academy.

2. Fill out the first two pages completely and send in with a \$50 non-refundable application fee to Ezra Academy.

FOR OFFICE USE ONLY:

Application Received on: _____ Pd.	<input type="checkbox"/>	<input type="checkbox"/>
Interview Date: _____	<input type="checkbox"/>	<input type="checkbox"/>
Acc. <input type="checkbox"/> Rej: <input type="checkbox"/> Reg. Rec. <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comp. Entry

EZRA ACADEMY

APPLICATION FOR ADMISSION

2010/ 2011

Junior And Senior High School

119-45 Union Turnpike Forest Hills, N.Y. 11375

(718) 263-5500 FAX (718) 520-9424 E-Mail: ezraacademy@gmail.com

Print Carefully and Legibly

1. Name _____

Last Name	First Name	Middle Name	Hebrew Name
Student E-Mail Address _____	Parent E-Mail Address _____		
Student Cell # _____	Gender : Male / Female (circle one)		

2. Social Security # _____

3. Home Address _____ () _____ - _____

No. and Street	City or Borough	State	Zip	Telephone
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4. Date of Birth _____ / _____ / _____

Place of Birth _____

5. Father's Name _____ Place of Birth _____ Occupation _____

Home Address _____ Phone Number () _____ - _____

Firm Name _____ Address _____ Telephone () _____ - _____

Cell Phone # _____

6. Mother's Name _____ Place of Birth _____ Occupation _____

Home Address _____ Phone Number () _____ - _____

Firm Name _____ Address _____ Telephone () _____ - _____

Cell Phone # _____

7. Are parents: Married _____ Separated _____ Divorced _____ Is either parent deceased? _____ Which? _____

If parents are divorced, who has legal custody of the child? _____

8. Is the Student Adopted? _____ Date: _____

9 Are both Parent's Jewish? _____ Did either Parent convert to Judaism? _____ Date: _____

10. Name of School presently attending _____ Address _____

Hebrew Grade _____ Teacher _____ Principal _____

English Grade _____ Principal _____

11. If you attended more than one school, list them below:

Name of School	Address	Dates of Attendance
_____	_____	_____
_____	_____	_____

12. Please list sisters and brothers, ages and schools attended:

Names	Ages	School Attended	Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

*Have you ever been in a resource room or special education program? **Yes / No** Grade _____

Has student ever had an IEP or Educational Evaluation? _____ Date _____

PRINCIPAL'S REPORT ON APPLICANT

To be filled out by your Principal (s)

Student's name _____ Date: _____

Name of School _____ Principal's Name _____

Address _____ Phone # _____

Standardized Achievement Test Scores (Name of test) _____

(Please include Xerox of actual test results)

	DATE	READING COMPREHENSION— GE	TOTAL MATH- GE	TOTAL BATTERY
GRADE 6				
GRADE 7				

	CHUMASH	<u>HEBREW STUDIES</u> (if currently enrolled) TALMUD	PROPHETS	HEBREW LANGUAGE
GRADE 6				
GRADE 7				
GRADE 8 (most recent grade)				

JUNE GRADE	MATH	<u>SECULAR STUDIES</u> ENGLISH	SCIENCE	SOCIAL STUDIES
GRADE 6				
GRADE 7				
GRADE 8 (most recent grade)				
GRADES 9 OR 10	Please submit most recent/June report card.			

Please include remarks regarding this student such as effort, diligence, personality , character.

Is this student currently enrolled in a resource room or receiving any special/remedial services?

If so, specify _____

Please notify the school of any educational evaluation or IEP done for student.

Kindly return this application to: Ezra Academy, 119-45 Union Turnpike,
Forest Hills, NY 11375