



## APPLICATION FORM

### STUDENT INFORMATION

Full name as it appears on passport or ID card \_\_\_\_\_

The name you are called by \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Hebrew Date of Birth \_\_\_\_\_

Passport Number \_\_\_\_\_

Social Security and/or Teudat Zehut \_\_\_\_\_

### PARENT INFORMATION

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Father's TZ or Passport #: \_\_\_\_\_ Father's Date of Birth \_\_\_\_\_

Business Tel. \_\_\_\_\_ Fax \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's TZ or Passport #: \_\_\_\_\_ Mother's Date of Birth \_\_\_\_\_

Business Tel. \_\_\_\_\_ Fax \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Parent's Marital Status \_\_\_\_\_





Please list all siblings in family:

Name	Age	School/Occupation

Please list all schools and seminaries you have attended:

Name of school	Year(s) attended	Reason for change

### QUESTIONNAIRE

How did you hear about us?

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Please tell us what is it you would like to accomplish by joining the seminary?

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Do you have any special talents or interests?

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Are you involved in any extracurricular activities? Please elaborate.

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What do you do in your spare time?

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If you could pick a talent, hobby or special interest you would like to cultivate, what would it be?

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How would you describe your personal strengths?

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**MEDICAL INFORMATION**

Do you suffer from any allergies or medical ailments? \_\_\_\_\_

If so, please note condition and treatments (all information will remain confidential among the staff):

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**Please attach a letter from your doctor describing your medical situation and confirming that there are no limitations for you to live in a dormitory and join physical activities.**





## RECOMMENDATIONS

Please supply us with two names of recommendation and their contact details, one of them must be a principal, school counselor or teacher of your previous school.

1. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

## EMERGENCY CONTACT

Please give the names of two people in Israel who can be contacted in case of an emergency.

1. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

2. Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_





## TUITION CONTRACT

The following section should be signed by person who is taking responsibility for payment if it is someone besides for yourself.

The current charge for one month at The Seminary is \_\_\_\_\_ which will be paid in advance.

This fee includes: Full board and lodging, shiurim, workshops, mentoring, trips and weekly meeting with our staff to monitor progress. It does not include transportation -when needed.

We work on a sliding scale, to accommodate the financial situation of the individual applicant. Please send a detailed letter of explanation with proof of income if you require a scholarship.

Payments are non-refundable and non-cancelable.

We are closed for some Yomim Tovim and every other Shabbos.

### Important

One month's paid notice must be given before student decides to leave.

There is a minimum fee for the first month even if student decides to leave before it ends.

Any damage to the premises or its contents must be paid in full.

For this purpose a deposit of \$100 is required.

If a check were to bounce full payment must be made in cash immediately and any expenses paid. When paying with a non-local check please add 1.5% for exchange fee.

### I agree and take full responsibility to the above conditions of payment:

Name: \_\_\_\_\_

Cell phone: \_\_\_\_\_

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

E-Mail: \_\_\_\_\_

Telephone: \_\_\_\_\_

Signature: \_\_\_\_\_





## PARENT COMMITMENT

Please mark the following:

- I allow my daughter to participate in all the seminary's organized trips.
- My daughter may also join independently planned trips, but only with prior school permission, given by the Aim Habayit.
- I allow my daughter to join the Chessed Program supervised by the seminary; this might include helping families and visiting hospitals.
- I hereby authorize the staff at Bnos Melech to recommend a therapist or mentor for my daughter if the need arises.

At The Seminary we do our best to take great care over all our students at all times. However, we assume NO RESPONSIBILITY whatsoever over their physical and emotional wellbeing. Additionally, we do not take responsibility over student's belongings. All items should be clearly name-tagged, and anything left unattended becomes hefker.

Every student is required to have medical insurance during their stay at The Seminary.

**I declare that all the information given on this form is correct.**

Signature of Student: \_\_\_\_\_

Signature of Parent: \_\_\_\_\_

Date: \_\_\_\_\_





## STUDENT COMMITMENT

1. Students must dress in a refined and tznius way at all times as befitting for a bas yisroel. Remember: When in doubt always asks a staff member.
2. No jeans or denim material should be worn.
3. Skirts must be sufficiently below the knee - whether sitting or standing.
4. Only appropriate nightwear suitable for a Haimishe girl should be worn. (No pajamas are allowed in the dormitory!)
5. Attendance at all classes and night shiurim is mandatory. When unable to attend for a valid reason you must receive permission in advance.
6. When going away for Shabbos, please make sure to give the staff the details of the family you will be staying with, early in the week.
7. Curfew is at 10pm. Please keep the noise level to a minimum after that time.
8. According to Da'as Torah in Eretz Yisroel, only phones with a "kosher" stamp are allowed.
9. NO laptops, DVD players or other devices with screens are allowed unless permission is granted by the administration. The office computer will be available during certain hours to enable the students to check their email.
10. Please make sure that you have appropriate music on your MP Player and that it is ready for inspection at any time.
11. Every student must take part in cooking, baking and cleaning duties.
12. High standard of order and cleanliness will be expected.
13. We take no responsibility for personal possessions.
14. In the event that a student does not comply with the rules and her behavior, dress or manner is not befitting a Bas Yisroel, she will be asked to leave without prior notice.

**I am aware that the rules in the orientation packet are inclusive to the above rules of The Seminary, and I willingly agree to sign on all of them.**

Signature: \_\_\_\_\_

***Please return this application form, along with \$100 application fee and current picture.***

