

Midreshet Rachel V'Chaya College of Jewish Studies for Women

23 Rechov Eliezer HaLevi • Kiryat Moshe • P.O. Box 3151 • Jerusalem 96343 • Tel: 02-654-0622 •

Fax: 02-651-9183 or 1-501-641-0817 •

mrachel@darchenoam.org • www.darchenoam.org

**DIGITAL
PHOTOGRAPH**

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INSTRUCTIONS: ALL APPLICATIONS MUST BE FILLED OUT COMPLETELY AND SUBMITTED DIRECTLY TO THE ISRAEL OFFICE (BY MAIL OR FAX).

I wish to learn from _____ 20 _____ until _____ 20 _____

If you are interested in living in our dorm, please indicate: _____

Name: _____
last first middle Hebrew

Address for Correspondence: _____
street city state zip country

Tel.#: _____ Fax #: _____ Email: _____

Cell#: _____

Permanent Address: (give the name and address of a person through whom you can always be reached when not at your correspondence address. Write "same" if both addresses are the same.)

street city state zip country
Tel.#: _____ Fax #: _____ Email: _____

Applicant's occupation/field of study: _____

Name of business or Institution/tel.# _____

Birth Date: _____ Place of Birth: _____ Citizenship: _____
(write out month)

Passport #/ Israel I.D.#: _____ Expires: _____ Type of Visa: _____

Previous Visits to Israel: Purpose of trip & dates: _____

Synagogue you attend: _____ Rabbi: _____

Address & Tel.# of Rabbi: _____

Father's Full Name: _____ city & country of birth: _____

Mother's First and Maiden Name: _____ c. & c. of birth: _____

Mother's Last Name (if not the same as father's): _____

Parents' marital status: married _____ divorced/separated: _____ deceased: _____

Father's Address & Tel: _____

Mother's Address & Tel: _____

Father's occupation: _____ Name of business/tel.#: _____

Mother's occupation: _____ Name of business/tel.#: _____

Husband's Name: _____ Occupation: _____

Children's Names & Ages: _____

Were you born Jewish? Yes ___ or No ___

Converted: Yes ___ or No ___ (If yes by which Beit Din?) _____ Adopted? Yes ___ or No ___

Were your parents Jewish born? Mother: Yes ___ or No ___ Father: Yes ___ or No ___

Mother Converted: Yes ___ or No ___ (If yes by which Beit Din?) _____ Adopted? Yes ___ or No ___

Father Converted: Yes ___ or No ___ (If yes by which Beit Din?) _____ Adopted? Yes ___ or No ___

Were your grandmothers Jewish born?

Maternal grandmother: Yes ___ or No ___

Converted: Yes ___ or No ___ (If yes by which Beit Din?) _____ Adopted? Yes ___ or No ___

Paternal grandmother: Yes ___ or No ___

Converted: Yes ___ or No ___ (If yes by which Beit Din?) _____ Adopted? Yes ___ or No ___

Colleges or Universities You Attended:

Name of School	Location	Years attended	Degree	Major & Minor	Graduation date
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Torah Education:

Name of School	Location	Years attended	Subjects
_____	_____	_____	_____
_____	_____	_____	_____

Proficiency in Hebrew:

(None - 4 is high)	Ability to read	Ability to Translate	
Reading _____	1 2 3 4	1 2 3 4	
Rashi _____	1 2 3 4	1 2 3 4	
Writing none _____	poor _____	fair _____	good _____
Speaking none _____	poor _____	fair _____	good _____

If time has elapsed since you last attended school, describe how that time has been spent: (if you've been employed please give name of company or employer) _____

What are your vocational goals? _____

Activities and organizations in which you have participated, and in what capacity: _____

Are you presently undergoing treatment for any illness? (physical or emotional) Please explain: _____

Do you currently, or have you in the past, suffered from or taken medication for emotional problems? If so, please explain. _____

Are you on any medication for physical problems? If so, what? Please explain. _____

Interviewed by Staff?: _____ Interviewer's Name: _____ Interview Date: _____

If possible, please give the name of a person in Israel who can be a reference for you:

Name: _____ Address: _____ Tel.#: _____

In case of emergency, the following people should be contacted:

In Israel: Name: _____ Address: _____


Tel.#: _____ Relationship: _____


How did you hear about us?

Rabbi/Rebbetzin Name: _____ Contact Info. _____

Friend Name: _____ Contact Info. _____

Other Name: _____ Contact Info. _____

 Please write a one to two page essay describing your religious background and present commitment to Judaism, extent of your Jewish studies and textual skills in various Jewish subjects; your reasons for wanting to study at this time and why you feel MRC is appropriate for you. Discuss any books or people (secular or religious) which have had an impact on you and why.

 Please enclose two letters of recommendation, at least one of which is from a rabbi or Jewish educator who has known you for a period of about one year.

Tuition Fees for the complete academic year 2007-2008 are \$9,200. This includes a non-refundable fee of \$250 for registration and \$350 for student activities. This \$600 is due upon acceptance. Financial assistance may be available from your local synagogue, MASA Program, JCC, Federation, and/or Hillel. If further financial assistance is required. Please request a financial assistance application form.

I agree to abide by the rules and regulations set by Midreshet Rachel v'Chaya for the health, safety, and welfare of the students. I understand that Midreshet Rachel v'Chaya, while it takes precautions to eliminate the risk of loss or damage to applicant's personal property, is not held financially responsible if such loss or damage should occur. I certify that the information given in this application is complete and correct.

Signature of Applicant _____

Date _____

Please ensure that your application is fully completed, including a digital photograph, essay, and two letters of recommendation. No decision can be made until all materials are received.