



YESHIVA DERECH HATORAH ♦ מתיבתא דרך התורה HIGH SCHOOL

2810 Nostrand Avenue ♦ Brooklyn, NY 11229
347.492.6611 ♦ Fax 347.492.6613 ♦ www.ydh.org

CHARTERED BY THE REGENTS OF THE UNIVERSITY OF THE STATE OF NEW YORK

APPLICATION FOR ADMISSION

HOW TO APPLY

1. **APPLICATION AND FEE:** A check or money order (no cash, please) for the non-refundable application fee of \$75 must accompany your completed application form. Attach additional sheets if you require more room to answer any of the questions on the application, or wish to include additional information about the applicant.
2. **REQUEST FOR TRANSCRIPTS:** A request for your records will be sent directly to your current school's principal.
3. All applicants for admission should take the Board of Jewish Education High School Entrance Examination. The school you attend will provide this information. Please be certain to check the appropriate line on the registration form so that your scores are sent directly to our office. If your school does not participate in the BJE High School Entrance Exam program, please contact us so that we may make alternate arrangements.
4. **PHOTOGRAPH:** Please attach a recent color photograph of the applicant in the space provided.
5. **PERSONAL INTERVIEW:** Applicants for admission will be invited with their parents for a personal interview with a representative of the Admissions Committee. Interviews are scheduled after the candidate's application and supporting documents have been received.
6. **WRITING SAMPLE:** At the interview, applicants will be asked to write a short paragraph.



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This application must be accompanied by the \$75 application fee

Attach
Student
Photo
Here

1) Student Name _____
(Please Print) Last First

Hebrew Name _____

2) Address _____
Number and Street City State Zip

3) Home Phone () _____ E-mail _____@_____

4) Date of Birth _____ Place of Birth _____
Month Day Year

5) Name of Current School _____

Address _____

Phone () _____ Fax() _____

Dates of Attendance: From: ____/____/____ To: ____/____/____/____

6) Name of Previous Schools Location Dates of Attendance

7) Father's Name _____
English Hebrew

Home Address _____ Home Telephone _____

Employer _____ Position _____

Business Address _____ Bus. Phone _____

E-mail _____@_____ Cell Phone _____

8) Mother's Name _____
English Hebrew

Home Address _____ Home Telephone _____

Employer _____
If different from above Position _____

Business Address _____ Bus. Phone _____

E-mail _____@_____ Cell Phone _____



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PRINCIPAL'S REPORT-APPLICANT EVALUATION

TO THE PRINCIPAL: Please complete this entire form with a candid assessment of the applicant's academic performance and personal qualities. ***Please attach transcripts of the seventh grade and eighth grade to date*** and send the completed form (with the transcripts) in a sealed envelope directly to **Yeshiva Derech HaTorah High School, 2810 Nostrand Ave., Brooklyn, NY 11229**. All information will be kept strictly confidential. Thank you for your cooperation.

Student's First Name: _____ Last Name: _____
Elementary School: _____
Address: _____ Phone: () _____

Present Grade: General Studies _____ Limudei Kodesh _____

Standardized Test Results: Name of Exam _____
Reading Percentile Grade _____ Math Percentile Grade _____

ACADEMIC EVALUATION

	Excellent	Very Good	Good	Average	Below Average	Unsatisfactory
Ability						
Achievement						
Work Habits						
Attitude Towards Learning						

Please elaborate on answers given above



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CHARACTER EVALUATION

	Excellent	Very Good	Good	Average	Below Average	Unsatisfactory
Honesty						
Maturity						
Behavior						
Leadership						
Creativity						
Concern						
Relationship with teachers						
Relationship with Students						
Personal Growth Potential						
Attendance						

Please elaborate on answers given above as well as your personal recommendation _____

Are there any special circumstances (home conditions, illness etc.) that may have impacted on the student's performance or should be taken into consideration? _____

Principal's Signature _____ Date _____