



# PACIFIC TORAH INSTITUTE / ישיבת תפארת משה אהרן

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## APPLICATION FOR ADMISSION

YEAR APPLYING FOR: 20\_\_\_\_ ENTERING GRADE: \_\_\_\_ DORMITORY YES / NO (PLEASE CIRCLE)

**PLEASE TYPE OR PRINT CLEARLY**

### APPLICANT

|                         |                 |                       |   |             |  |
|-------------------------|-----------------|-----------------------|---|-------------|--|
| APPLICANT'S NAME (LAST) |                 | FIRST                 | MIDDLE NAME                             | HEBREW NAME |  |
| APPLICANT'S ADDRESS     |                 |                       | APT #                                   | CITY        |  |
| STATE/PROV.             | ZIP/POSTAL CODE |                       | HOME PHONE                              |             |  |
| PRESENT SCHOOL          | EMAIL ADDRESS   |                       | PRESENT GRADE                           |             |  |
| PLACE OF BIRTH          |                 | DATE OF BIRTH (Y/M/D) | SOCIAL SECURITY NUMBER/SOCIAL INSURANCE |             |  |
|                         |                 |                       |   |             |  |

### PARENTS

|   |                 |                 |              |            |  |
|---|-----------------|-----------------|--------------|------------|--|
| FATHER'S OR GUARDIAN'S NAME (LAST)  |                 | FIRST           | M.I.         | TITLE      |  |
| FATHER'S ADDRESS (IF DIFFERENT FROM ABOVE)  |                 | CITY            | STATE/PROV   | ZIP/POSTAL |  |
| FATHER'S OCCUPATION   |                 | EMPLOYER'S NAME | COMPANY NAME |            |  |
| HOME PHONE  |                 | WORK PHONE      | CELL PHONE   | EMAIL      |  |
| MOTHER'S OR GUARDIAN'S NAME (LAST)  |                 | FIRST           | M.I.         | TITLE      |  |
| MOTHER'S ADDRESS (IF DIFFERENT FROM ABOVE)  |                 | CITY            | STATE/PROV   | ZIP/POSTAL |  |
| MOTHER'S OCCUPATION   |                 | EMPLOYER'S NAME | COMPANY NAME |            |  |
| HOME PHONE  |                 | WORK PHONE      | CELL PHONE   | EMAIL      |  |
| MATERNAL GRANDPARENTS   | ADDRESS         |                 | EMAIL        |            |  |
| PATERNAL GRANDPARENTS   | ADDRESS         |                 | EMAIL        |            |  |
| SYNAGOGUE AFFILIATION   | SYNAGOGUE RABBI |                 | LOCATION     |            |  |
| PARENTS AFFILIATION WITH JEWISH ORGANIZATIONS (RELIGIOUS/COMMUNAL/EDUCATIONAL, ETC) |                 |                 |              |            |  |
|   |                 |                 |              |            |  |

**INDICATE TWO INDIVIDUALS WHO MAY BE CALLED IN CASE OF EMERGENCY, OR IF PARENTS CANNOT BE REACHED**

|      |             |             |
|------|-------------|-------------|
| NAME | HOME NUMBER | CELL NUMBER |
| NAME | HOME NUMBER | CELL NUMBER |

**SIBLINGS**

| NAME | SCHOOL | AGE | GRADE |
|------|--------|-----|-------|
|      |        |     |       |
|      |        |     |       |
|      |        |     |       |
|      |        |     |       |
|      |        |     |       |
|      |        |     |       |
|      |        |     |       |

**EDUCATION HISTORY**

LIST CHRONOLOGICALLY ALL THE SCHOOLS THAT APPLICANT HAS ATTENDED

| NAME OF SCHOOL | CITY | DATES OF ATTENDANCE | GRADUATED (Y OR N) |
|----------------|------|---------------------|--------------------|
|                |      |                     |                    |
|                |      |                     |                    |
|                |      |                     |                    |

DESCRIBE THE COURSES APPLICANT HAS TAKEN THIS YEAR

**GEMORAH** (INCLUDE THE MESECHTA CURRENTLY BEING LEARNED, TIME ALLOTTED FOR GEMORAH IN THE SCHOOL DAY)

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**CHUMASH** (INCLUDE THE PARSHIOS EXPECTED TO BE LEARNED THIS YEAR AND THE MEFORSHIM REGULARLY STUDIED)

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**MATH** (PROVIDE COURSE NAME AND DESCRIBE MATERIAL STUDIED)

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| WHAT SUBJECTS DOES THE APPLICANT LIKE THE BEST?    |
|  |
| WHAT SUBJECTS HAVE BEEN HARDEST FOR THE APPLICANT? |
|  |

**LIST CHRONOLOGICALLY THE SUMMER CAMPS THAT APPLICANT HAS ATTENDED**

| NAME | CITY, PROVINCE/STATE | DATES ATTENDED |
|------|----------------------|----------------|
|      |                      |                |
|      |                      |                |
|      |                      |                |

**WHAT IS APPLICANT'S LIFE AMBITION/GOAL?**

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**IN WHICH ORGANIZATIONS AND/OR EXTRA CURRICULAR ACTIVITIES HAS THE APPLICANT PARTICIPATED IN SCHOOL/COMMUNITY?**

| NAME OF ORGANIZATION/EXTRA CURRICULAR ACTIVITY | DATES |
|--|-------|
|  |       |
|  |       |
|  |       |

**LIST ANY AWARDS/CERTIFICATES, SCHOLARSHIPS, AND/OR PRIZES APPLICANT HAS RECEIVED**

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**LIST HOBBIES; MUSIC; ART, OR ATHLETICS**

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**LIST ANY SPECIAL NEEDS APPLICANT MAY HAVE (PHYSICAL, SOCIAL, EMOTIONAL, ETC.)**

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**REFERENCES**

| RABBI OF SYNAGOGUE(NAME)            | ADDRESS | CITY | STATE/PROVINCE | ZIP/POSTALCODE | PHONE NUMBER |
|-------------------------------------|---------|------|----------------|----------------|--------------|
| PRESENT PRINCIPAL(NAME)             |         |      |                |                |              |
| PRESENT REBBE (NAME)                |         |      |                |                |              |
| PREVIOUS REBBE (NAME)               |         |      |                |                |              |
| OTHER REFERENCE (NON-FAMILY MEMBER) |         |      |                |                |              |

**AUTHORIZATION**

IT IS UNDERSTOOD THAT THE REGISTRATION OF ALL STUDENTS ADMITTED TO THE YESHIVA IS SUBJECT TO THE FOLLOWING CONDITIONS. ATTENDANCE AT THE SCHOOL IS A PRIVILEGE AND NOT A RIGHT. IN CONSULTATION WITH PARENTS, THE SCHOOL RESERVES THE RIGHT TO REQUIRE THE WITHDRAWAL OF ANY STUDENT. ATTENDANCE AT THE SCHOOL IS DEPENDENT UPON THE CONSISTENT COMPLETION OF ALL LEARNING ACTIVITIES TO THE BEST OF THE STUDENT'S ABILITIES, BOTH IN JUDAIC AND SECULAR STUDIES. THE STUDENT IS REQUIRED TO FAMILIARIZE HIMSELF WITH AND TO ABIDE BY THE RULES AND REGULATIONS OF THE YESHIVA. STUDENTS ARE EXPECTED TO UPHOLD THE MORAL PRINCIPALS AND GOOD NAME OF THE YESHIVA AT ALL TIMES – BOTH IN SCHOOL AND IN THEIR OUTSIDE ACTIVITES.

I HEREBY CERTIFY THAT THE INFORMATION GIVEN IN THIS APPLICATION IS COMPLETE AND ACCURATE.

***Information about students and families is protected by the PTI's Policy on Student Records.***

|                            |       |
|----------------------------|-------|
| PARENT/GUARDIAN SIGNATURE: | DATE: |
| APPLICANT SIGNATURE:       | DATE: |