



Application for Admissions 2012-2013

Deadline - January 27, 2012

5500 Redwood Road Oakland, CA 94619
(510) 531-8600 • www.ohds.org

STUDENT INFORMATION:

Child's Name _____

Child's Hebrew Name _____

Home Address _____

City, Zip _____ Telephone _____

Birthdate _____ Birthplace _____

Gender _____ Ethnicity _____

Grade in Fall 2012 _____

SCHOOL EXPERIENCE:

Present School _____ Grade _____ Public _____ Private _____

Address _____ Phone _____

Previous School _____ Grade _____ Public _____ Private _____

Address _____ Phone _____

Judaic/Hebrew School Experience _____

Address _____ Phone _____

Number of Years of Hebrew _____ of Judaic _____

Synagogue Affiliation (if any) _____

PARENT/GUARDIAN #1:

Name _____
Relationship to Student _____
Home Address _____
Home Telephone _____ Work Telephone _____
Cell Phone _____
Email _____
Occupation and Employer _____
Work Address _____

PARENT/GUARDIAN #2:

Name _____
Relationship to Student _____
Home Address _____
Home Telephone _____ Work Telephone _____
Cell Phone _____
Email _____
Occupation and Employer _____
Work Address _____

Parents are (please check):

- Married Single Widowed Domestic Partners
 Separated Divorced Remarried

If parents are divorced or separated, to whom should the admissions correspondence be sent?

SIBLINGS:

Name	Birth Date	Grade and School in September 2011
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OTHER INFORMATION:

1) How did you learn about Oakland Hebrew Day School?

2) Why do you feel that Oakland Hebrew Day School would be a desirable environment for your child and family?

3) Are there any reports, assessments, testing or documentation regarding your child that the school should know about? yes no If yes, please explain:

4) Does your child have any special needs that the school should know about? yes no
If yes, please explain:

5) What languages are spoken at home?

6) On a separate sheet, feel free to tell us more about your child's strengths and weaknesses, overall school experience and ideal learning environment.

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ADMISSIONS POLICY:

Oakland Hebrew Day School seeks to enroll students whose families are committed to Jewish education while developing their character, knowledge and observance within the school community. We attract students of diverse Jewish affiliation and economic backgrounds with a wide range of artistic, athletic and social talents. OHDS does not discriminate on the basis of color, race, national or ethnic origin in administration of its educational policies, admissions policies, scholarship programs and other school-administered programs. Oakland Hebrew Day School is handicapped accessible.

FEE REQUIREMENTS:

Please include your non-refundable application fee of \$75.00 with this application. Your cancelled check will serve as a receipt. Application fees cover evaluation and screening conducted during the application process.

This application is a request for enrollment for the 2012/2013 school year for the _____ grade.

PHOTO OF APPLICANT (OPTIONAL):

Please attach a photograph of the applicant to this application.

Parent/Guardian Signature

Date

Parent/Guardian Signature

Date

Thank you for your application.

Office Use Only

Grade _____ Check # _____ Received _____