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Office Use Only
Grade _____
Amt _____
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APPLICATION FOR ADMISSION – GRADES K - 8
2010/2011
Application Deadline January 29, 2010

Child's Name _____

Child's Hebrew Name _____

Home Address _____

City, Zip _____ Telephone _____

Birthdate _____ Birthplace _____

Gender _____ Grade in fall 2010 _____

PARENT/GUARDIAN #1:

Name _____

Relationship to Student _____

Home Address _____

Home Telephone _____ Work Telephone _____

Cell Phone _____

E-mail _____

Occupation and Employer _____

Work Address _____

PARENT/GUARDIAN #2:

Name _____

Relationship to Student _____

Home Address _____

Home Telephone _____ Work Telephone _____

Cell Phone _____

E-mail _____

Occupation and Employer _____

Work Address _____

Parents are (please check):

Married Single 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 2010
_____	_____	_____
_____	_____	_____
_____	_____	_____

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) _____

OTHER INFORMATION:

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

2) Please share with us any additional comments about your child or about your decision to apply to Oakland Hebrew Day School.

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

4) Please comment on your child's current experience in school, socially and academically

5) Please tell us of any diagnostic testing or evaluations your child has had (medical, educational or psychological).

6) Please tell us about the general health of your child

7) What languages, other than English, are spoken at home?

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:

Payment of a non-refundable application fee of \$75.00 is enclosed with this application. My cancelled check will serve as my receipt. Application fees cover evaluation and screening conducted during the application process.

This application is a request for enrollment for the 2010/2011 school year for the _____ grade. I have attached a photograph of my child.

Parent/Guardian Signature **Date**

Parent/Guardian Signature **Date**