



APPLICATION FOR ADMISSION 2022-2023 | 5783

TIFERES BAIS YAAKOV | 85 STORMONT AVENUE | TORONTO, ON M5N 2C3 | 416-785-4044

Please complete the entire application carefully, sign and return it with all the items listed on Page 4.

An incomplete application will not be processed. Please print clearly.

I wish to be admitted to Grade _____, in (month of enrollment) _____, (year of enrollment) _____.

Prospective Student Information				
LAST NAME / ENGLISH	LAST NAME / HEBREW	FIRST NAME/ENGLISH	M.I.	FIRST NAME/HEBREW
NAME AS APPEARS ON BIRTH CERTIFICATE		SOCIAL INSURANCE NUMBER		
ADDRESS		CITY	PROVINCE	POSTAL CODE
HOME PHONE	HOME EMAIL ADDRESS	STUDENT'S CELL PHONE	STUDENT'S EMAIL ADDRESS	
DATE OF BIRTH	PLACE OF BIRTH <small>(if foreign, please indicate date of entry)</small>	STATUS IN CANADA <small>(Citizen, Landed Immigrant, Permanent Resident, etc.)</small>	DATE OF ARRIVAL IN CANADA	
<i>IF YOU ARE A NATURALIZED CITIZEN PLEASE PROVIDE US WITH A COPY OF YOUR CITIZENSHIP CARD/PERMANENT RESIDENT CARD.</i>				
PRESENT SCHOOL		PRESENT GRADE		

Parent Information				
MARITAL STATUS: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> Widowed <input type="checkbox"/> Remarried				
FATHER OR GUARDIAN'S NAME (LAST)	TITLE	FIRST NAME	FIRST NAME/HEBREW	
FATHER'S ADDRESS (IF DIFFERENT FROM ABOVE)		CITY	PROVINCE	POSTAL CODE
FATHER'S EMPLOYER	OCCUPATION	BUSINESS PHONE	EXTENSION	
HOME PHONE	CELL PHONE	EMAIL ADDRESS		
MOTHER'S NAME (LAST)	TITLE	FIRST NAME	FIRST NAME/HEBREW	
MOTHER'S ADDRESS (IF DIFFERENT FROM ABOVE)		CITY	PROVINCE	POSTAL CODE
MOTHER'S EMPLOYER	OCCUPATION	BUSINESS PHONE	EXTENSION	
HOME PHONE	CELL PHONE	EMAIL ADDRESS		

Family Information

PLEASE LIST THE NAMES, AGES, SCHOOLS AND GRADES OF ALL CHILDREN IN THE FAMILY

NAME	AGE	SCHOOL	GRADE

Previous Schools

PLEASE LIST CHRONOLOGICALLY ALL OTHER SCHOOLS THAT APPLICANT HAS ATTENDED

SCHOOL	GRADE AND YEAR ENTERED	GRADUATED (Y OR N)

Summer Camps

PLEASE LIST CHRONOLOGICALLY ALL SUMMER CAMPS THAT APPLICANT HAS ATTENDED

CAMP	YEARS ATTENDED	POSITION HELD

List any offices student may have held in school or in any organizations:

List any special talents or skills:

List any work experience (*i.e. Tutoring, Volunteering, Summer Jobs other than camp, etc.*):

What do you think you can contribute to Tiferes Bais Yaakov:

Personal Information CONFIDENTIAL WHEN COMPLETED AND SIGNED

PLEASE NOTE: In order to provide the most appropriate educational environment for your daughter, it is crucial for the school to have a full picture of your daughter's educational and medical background.

PLEASE INDICATE "NOT APPLICABLE" WHERE NECESSARY.

A. MEDICAL HISTORY AND INFORMATION:

Please list all medications that your child takes on a regular basis, including non-prescription drugs and vitamins.

NAME OF DRUG/VITAMIN – FREQUENCY:

Please list all major operations/surgeries relevant to school life and activities.

- We confirm that our daughter's immunization records are up to date.
A full medical record will need to be submitted upon registration for the 2020-2021 school year.

B. EDUCATIONAL INFORMATION:

Has your daughter ever been assessed educationally or psycho-educationally? *(IF YES, PLEASE PROVIDE DETAILS AND REPORTS)*

C. ADDITIONAL INFORMATION

- Are there any issues or special circumstances that you'd like to discuss at the time of the interview? Yes No
- Is your daughter or either parent converted? Daughter Mother Father
- Language spoken at home: _____
- Synagogue Affiliation: _____ Personal Rav: _____

PARENT / GUARDIAN'S NAME

PARENT / GUARDIAN'S SIGNATURE

DATE

Permission

- We allow Tiferes Bais Yaakov to contact our daughter's elementary school for any information they may require.***

PARENT / GUARDIAN'S NAME

PARENT / GUARDIAN'S SIGNATURE

DATE

Confirmation

Torah Chinuch is a partnership between home and school, and it is crucial that we all work together to ensure a pleasant school experience. Therefore, all applicants and their parents are requested to carefully read the Student Handbook so that the expectations of a Tiferes Bais Yaakov student are clearly understood. Additionally, by signing here you certify that all information in this application is true and accurate. Any false or withheld academic information may result in the rescinding of acceptance.

DATE

STUDENT'S SIGNATURE

MOTHER'S SIGNATURE

FATHER'S SIGNATURE

INCOMPLETE OR UNSIGNED APPLICATIONS WILL NOT BE PROCESSED.

THE FOLLOWING MUST BE INCLUDED WITH THIS APPLICATION:

- \$150 Application Fee (\$300 after December 1, 2021) payable to Tiferes Bais Yaakov
- 2 Passport Photos or a Digital Picture
- Copy of Hebrew and General Studies Report Card from Grade 7 and Midterm Report Card from Grade 8
- Copy of Birth Certificate

Please ensure all Reference Forms are submitted.

SCHOOL APPLICATION POLICY

No applications will be accepted after February 7, 2022.

FOR OFFICE USE ONLY

Interview: _____

ENTRANCE EXAM SCORES

Science: _____

English: _____

Math: _____

Safa: _____

Bekius: _____

Halacha _____

Navi: _____

Chumash _____

Application Received _____ Interview Date _____ Response Sent _____

Accepted _____ Not Accepted _____ Deposit Received _____

Principals Report LK _____ Principals Report GS _____ Teacher Recommendation _____