

**NEW STUDENT APPLICATION
2021-22**

Date: _____

FAMILY INFORMATION

Family Name _____

Father _____ Title _____ Mother _____ Title _____

Street Address _____ City, State, Zip _____

Home phone _____

Father Cell _____ Father Email _____

Mother Cell _____ Mother Email _____

STUDENT INFORMATION

Child's Hebrew and English Name	Grade Entering	M or F	Birthday Hebrew and English	Previous School/Program (please include phone number)	Birth Country/ Language Spoken at Home

A non-refundable \$100 application fee is required. This fee will be applied to your registration fee upon acceptance and enrollment. Payment may be made by credit card (see below) or submitted to the Business Office at 6122 N. California, Chicago, IL 60659.

Please note we must receive your application and fee by **January 31, 2021** to reserve your child's place in a class. After January 31, the application fee will be increased, and space may not be available.

Please Note: The policy of the school is for all students to have all state-required vaccinations and immunizations.

Name, as it appears on the card: _____

Address (if different from above): _____

Card Number: _____ Expiration date: _____ Security code _____

Signature: _____

(New families – please fill out reverse side)

REFERENCE INFORMATION – NEW FAMILIES ONLY

Paternal Grandparents: _____
 Titles Names (First & Last, Husband & Wife) Address Zip

 Phone Email (if applicable)

Maternal Grandparents: _____
 Titles Names (First & Last, Husband & Wife) Address Zip

 Phone Email (if applicable)

Name of Shul Family Attends _____

Family Rav _____ **Phone Number** _____

Sibling Information

Name	School/ Program Attending	Date of Birth

Please be advised that all new families must confirm that they comply with the following technology guidelines:

- JDBY-YTT strongly recommends that internet access not be available in your home. In the event that internet access is required the computer must have comprehensive filters, and proper safeguards must be present to prevent unsupervised use.

Please initial to confirm that you are aware of the above policies. _____ _____
Father Mother

The policy of the school is for all students to have all state-required vaccinations and immunizations. No religious exemptions will be accepted.

Please initial to confirm that you are aware of the above policy. _____ _____
Father Mother

Additional Comments

<p>For office use only</p> <p>Vaad Hachinuch _____</p>
