

APPLICANT NAME _____

Application Form

**Grades 9-12
2024-2025**



Instructions and Pertinent Information

This application is a request for admission for new students only. It becomes binding upon the parents and the school only when the applicant has been formally accepted and a tuition agreement has been signed.

- An application form should be completed for each student. Please fill out the application completely and print clearly.
- An **application fee** of \$110 per child must accompany this application (max. \$220 per family). This fee is non-refundable.
- Boys entering grades 9-12 must complete an interview with the administrators of the Cooper Yeshiva High School for Boys.
- Girls entering grades 9-12 must complete an interview with the administrators of the Goldie Margolin High School for Girls.
- Complete all supplemental Health and Permission Forms and submit updated vaccination forms.
- There is an application checklist provided for your convenience on Page 13. Please use this checklist as a guide to ensure that your application is complete and all required documents are included.
- **Please make sure your transcript is sent to the office. Applications cannot be completed without transcripts. Parents must complete the Release of Records form in this packet and submit it to your child's current school.**

All applications and correspondence should be mailed or emailed to:

Erica Stoltz
Office of Admissions
390 S. White Station Road
Memphis, TN 38117
901.682.2400, ext. 223
erica.stoltz@mhafyos.org

(1) APPLICANT

(Please print)

Applicant's Legal Name _____
Last First Middle

Full Hebrew name _____ Preferred Name _____

Most recent grade completed ___ Gender: Male Female Student cell phone # _____ - _____ - _____

Date of birth ___ / ___ / ___ Hebrew date of birth _____

Place of birth _____ Age _____

Current School _____ Current Grade _____

School address _____ School phone _____

Name of person completing application _____

(2) PARENT(S)**FAMILY INFORMATION****FATHER** Dr. Mr. Rabbi_____
Last First Middle

Home address _____

City _____ State _____ ZIP _____

Home phone _____

E-mail _____

Occupation/Position _____

Name of employer _____

Business address _____

City _____ State _____ ZIP _____

Business phone _____ Ext _____

Cellular phone _____

MOTHER Dr. Mrs. Ms._____
Last First Middle

Home address _____

City _____ State _____ ZIP _____

Home phone _____

E-mail _____

Occupation/Position _____

Name of employer _____

Business address _____

City _____ State _____ ZIP _____

Business phone _____ Ext _____

Cellular phone _____

(3) SIBLING(S)

Name _____ Age _____

Current School _____ Current grade _____

Name _____ Age _____

Current School _____ Current grade _____

Name _____ Age _____

Current School _____ Current grade _____

Name _____ Age _____

Current School _____ Current grade _____

(4) GRANDPARENT(S)**Name of paternal grandfather** _____ Grandfather deceased Address (if living) _____

City _____ State _____ ZIP _____ Phone _____

Grandfather email _____

Name of paternal grandmother _____ Grandmother deceased Address (if living) _____

City _____ State _____ ZIP _____ Phone _____

Grandmother email _____

Name of maternal grandfather _____ Grandfather deceased Address (if living) _____

City _____ State _____ ZIP _____ Phone _____

Grandfather email _____

Name of maternal grandmother _____ Grandmother deceased Address (if living) _____

City _____ State _____ ZIP _____ Phone _____

Grandmother e-mail: _____

(5) MISCELLANEOUS INFORMATION

- (a) Applicant's parent(s) are currently married: Yes – go to question (i)
 No – go to question (b)
- (b) Applicant's parent(s) are: Separated Divorced Father deceased Mother deceased
- (c) If parent(s) are divorced or deceased: Father remarried Mother remarried
- (d) Name of step-parent(s): _____
- (e) Name, address or email to which school information (e.g. flyers, report cards) should be sent:
- Name _____
- Street address and email _____
- City _____ State _____ ZIP _____ Phone _____
- (f) Name and address to which school billing information should be sent: Check here if same as above.
- Name _____
- Street address _____
- City _____ State _____ ZIP _____ Phone _____
- (g) Applicant lives with: Mother – go to question (i)
 Father – go to question (i)
 Other legal guardian – go to question (h)
- (h) If living with a legal guardian:
- Legal guardian name _____ Relationship to applicant _____
- Street address _____ Email _____
- City _____ State _____ ZIP _____ Phone _____
- (i) Are you applying for financial aid? Yes No
- (j) How did you learn about Margolin Hebrew Academy / Feinstone Yeshiva of the South? _____
- _____
- _____
- _____

(6) PERTINENT JEWISH INFORMATION

(a) Synagogue affiliation: _____

(b) Is the Applicant Jewish-by-birth? If not, did the applicant convert? If applicable, please submit all conversion documents. _____

(c) Is the Applicant's mother Jewish-by-birth? If not, did the applicant's mother convert? If applicable please submit all conversion documents. _____

(d) Please list any Jewish organizations with which you are affiliated.

(e) Please list any Jewish camps that the applicant attended this past summer, and any additional information you would like us to know about you, your child, or your family: _____

(7) PREVIOUS SCHOOL INFORMATION

Please list the school(s) that your child has attended in the past.

Name of school	From date	To date
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

(8) APPLICANT PERSONAL INFORMATION

(a) Are there any physical or emotional impairments of which the school should be aware? If so, please describe.

(b) Does your child require any academic support at home or at school (tutoring, counseling, medical, etc.)? If so, please explain and provide official documentation, including IEP's.

(c) Is your child on any medication? List all medications, dosage and prescribing physician.

(d) Has the applicant ever applied to or attended Margolin Hebrew Academy / Feinstone Yeshiva of the South in the past? If yes, when?

(e) Please list other schools to which you are applying. _____

TO BE FILLED OUT ONLY IF THE APPLICANT IS ENTERING GRADES 9-12.

Please fill out this placement survey to the best of your ability. Please note that there are skills and content on this list that students cover throughout Junior High and High School (Grades 9-12). Therefore, please do not be surprised if there are items that your child has not yet learned.

(Please print)

Applicant's Name _____
Last
First
Middle

Applying for admission to the _____ grade for the 20____ school year.

Please check the corresponding response.

SKILL OR CONTENT AREA	APPLICANT IS COMFORTABLE WITH THIS.	APPLICANT HAS SOME EXPERIENCE WITH THIS.	APPLICANT HAS NOT YET LEARNED THIS.
Can write Hebrew letters in script	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can read Hebrew words with vowels	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can read short stories in Hebrew (and understand them)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can speak complete sentences in Hebrew	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can write sentences in Hebrew	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can read / sing the first four blessings of <i>Birkat haMazon</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can fluently read the three paragraphs of the <i>Shema</i>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can read from the Chumash	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has learned Chumash (from the Chumash itself) and can explain what s/he has read	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can understand a class taught in Hebrew	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can write a short story in Hebrew	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can read Rashi script	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has studied selections of Rashi's commentary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has learned Mishna	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can explain the argument in a Mishna he has been taught	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Has learned Gemara	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Can explain the argument in a small selection of Gemara he has been taught	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Has the Applicant ever been asked to leave a school? If yes, please name the school and explain the circumstances in detail.

TO BE FILLED OUT BY THE CHILD ONLY IF ENTERING GRADES 9-12.

(Please print)

Applicant's Name _____
Last First Middle

Current School _____

(1) List any school activities in which you have participated in the last four years and indicate the level of your involvement (e.g. Student Council, Treasurer, etc.)

Activity _____

Activity _____

Activity _____

(2) Which of your school activities is the most important to you? Why? _____

(3) What are your two favorite academic subjects in school? Why? _____

(4) List any out-of-school activities in which you have participated in the last two years and indicate the level of your involvement (e.g. piano lessons, clubs, baseball).

Activity _____

Activity _____

Activity _____

(5) Which of your out-of-school activities is most important to you? Why? _____

(6) How do you usually spend your after-school and weekend free time? _____

(10) APPLICANT QUESTIONNAIRE CONTINUED

ENTERING GRADES 9-12

(7) How have you spent the last two summers? _____

(8) What goals, personal and academic, do you want to achieve while you are at Margolin Hebrew Academy / Feinstone Yeshiva of the South?

(9) Name and describe any awards or recognitions of distinction you have received.

(10) Please explain in detail any and all gaps in schooling, including hospitalizations.

(11) Highest level of math completed? _____

(12) What else would you like us to know about you? _____

Student's name: _____

To the Principal or Counselor:

The student named above is applying to Margolin Hebrew Academy/Feinstone Yeshiva of the South and requests that you complete this form. We are aware of how much time forms of this sort require, and we sincerely thank you for your help. Your statement will become part of our confidential admissions file to be used by those involved in our admissions decision process. At no time will the applicant or his/her parents have access to it.

1. The student has attended your school for _____ years, beginning ____ / ____ / _____.
2. Length of time you have been acquainted with the student? _____
3. Has the student received any special personal and/or academic support at your school (tutoring, counseling, medical, etc.)? If so, please explain.

4. Has the student distinguished himself/herself in any way (academically, athletically, etc.)?

5. Are there any special circumstances of which we should be aware?

Name _____ Position _____

School _____

Address _____

City _____ State _____ ZIP _____ Phone _____

Signature of school official _____ Date _____

Please send the Release of Records form / Prior School Information pages and the required transcripts, report cards and standardized test scores as soon as possible.

Thank you for your attention in this matter.

Please mail or email to:

Margolin Hebrew Academy/Feinstone Yeshiva of the South · 390 S. White Station Road · Memphis, TN 38117 · erica.stoltz@mhafyos.org
901.682.2400 · Attn: Office of Admissions

APPLICATION CHECKLIST

PLEASE REVIEW AND CHECK THE FOLLOWING TO ENSURE THAT YOUR APPLICATION IS COMPLETE:

For applicants entering Grades 9-12

- **Release of Records / Prior School Information** form has been signed and sent to the school your child is currently attending and all past high schools.
- Please make sure you have included the application fee of \$110 per student (max. \$220 per family).
- Immunization records and supplemental health forms are required to be submitted to the MHA Office before a student can attend.
- **Transcripts are required before your student can be accepted.**
- Please make sure all portions of the application has been completed.
- Please include copies of any private or county testing results.
- Pages 9 and 10 of the application have been completed by the student.
- Immunization records, supplemental health forms, medical authorization form (for dormers), and insurance cards (for dormers) are **required** to be submitted to the MHA Office before a student can attend.
- Students applying for grades 9-12 are required to take a Math and English Placement Exam.

For questions regarding this application or to schedule a visit to the school, please contact:

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