

Application Form



Please complete the application in full and sign and date the bottom of page 3.
We recommend that you keep a copy of everything you submit.

Please enclose with your application:

- One letter of recommendation from your Rabbi, principal or teacher
- Copies of 'A' level certificates and, if appropriate, any degree certificates
- A registration fee of £50.00 (non-refundable)
(Cheques should be made payable to Shaarei Orah Ltd)
- Signed and dated financial declaration (attached)

SEND ALL ITEMS TO:

The Registrar
Shaarei Orah
19 Highfield Road
Golders Green
NW11 9LS

Please submit all of the above as soon as possible.

For Which Academic Year Are You Applying? 20_____

Applying For: Beis Hamedrash Programme Only

Beis Hamedrash & Academic Center

Name of Course _____

Personal Information

Last Name	First Name
Hebrew Name (Write in Hebrew)	
Date Of Birth	Nationality
Home Address	Correspondence Address (If Different to Home Address)
Post Code	
Telephone Number	Email address
Mobile Telephone Number	
Current Yeshiva or Occupation	Yeshiva/Work Address
Current Rosh Yeshiva	Telephone Number
	Fax Number
Your Rav	Telephone Number
	Fax Number

Application Form continued

Education

School	Address	Years Attended
Yeshiva		
Secondary School		

Qualifications Obtained

LEVEL	DATES	SUBJECTS	GRADES
'A' levels (<small>'A/S' levels</small>)			
GCSEs			
Other Qualifications			

Application Form continued

Gemara Studies in the Last 3 Years

This Year	Last Year	Two Years ago	
How well can you prepare Gemara on your own?			
Commentaries you use in the study of Gemara (mark all which apply)			
<input type="checkbox"/> Rashi	<input type="checkbox"/> Tosafos	<input type="checkbox"/> Rishonim	<input type="checkbox"/> Achronim
Commentaries you use in the study of Chumash (mark all which apply)			
<input type="checkbox"/> Rashi	<input type="checkbox"/> Ramban	<input type="checkbox"/> Others (please specify) _____	

<h3>Youth Movements/ Organisations</h3> <p>Please list the youth movements and organisations in which you have participated, and state in what capacity you were involved:</p>	<h3>Other Activities, Experience & Affiliations</h3> <p>Please briefly describe any activities in which you have been actively involved:</p>
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I commit myself to study at Shaarei Orah and to observe the regulations set in the Students handbook.

I confirm that the information that I have included in this application is correct and complete.

SIGNATURE OF APPLICANT

DATE

Application Form continued

Financial Declaration

To be completed by applicants and those taking responsibility for the payment of fees.

Please note that every student takes direct responsibility for the payment of the University of London fees to the University. In addition, £3,600 is payable to Shaarei Orah. For those who are studying exclusively in the Bais HaMedrash there is a recommended contribution of £1,800.

In the event that a student fails to comply with the rules of the Bais Medrash or the Academic Centre as per the Student Handbook, Shaarei Orah reserves the right to exclude the student from either or both programmes without a refund of their payments. All outstanding fees will still need to be paid.

Bursaries and scholarships are available. If you require a bursary please contact Rabbi Z H Lieberman at rabbilieberman@shaarei-orah.org.

We, the undersigned

Applicant Name

Sponsor/any other person assuming responsibility for the payment of fees

of (please write complete address, including post code)

Hereby declare to Shaarei Orah as follows:

1. We shall be responsible for the full payment of the programme, including University fees and Shaarei Orah fees.
2. We shall observe all rules, regulations and standards of conduct fixed by Shaarei Orah, its agents and employees who, in the event of any breach, reserve the right to limit or terminate our participation in the programme.

Is residential accommodation required? (Additional fees will be payable)

Yes No

We acknowledge that we have read this form and understand the nature of the financial commitment.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF SPONSOR

DATE
