



Admission Checklist

PLEASE KEEP THIS CHECKLIST FOR YOUR RECORDS.

IT IS A GOOD WAY TO TRACK YOUR CHILD'S PROGRESS IN THE APPLICATION PROCESS.

- FIRST STEP - COME FOR A VISIT:** Call the Admission Office at 818.368.5781 x510 and arrange a visit to our school.
 - ✓ Elementary School Open Houses: Tuesday, November 8, 2011; Wednesday, December 7, 2011; Thursday, January 19, 2012: 9:30AM-11:30AM
 - ✓ Middle School Open House: Sunday, December 4, 2011: 10:00AM-12:30PM

- SECOND STEP - THE APPLICATION:** Complete the application form and return to Heschel no later than February 3, 2012. Your application is not complete without the following items:
 - ✓ Completed application
 - ✓ Non-refundable application fee of \$125.00
 - ✓ Copy of birth certificate
 - ✓ Completed Student Questionnaire (Middle School applicants only)
 - ✓ Small recent photo (optional)

- THIRD STEP - THE INTERVIEW:** Once your admission application is submitted you will be scheduled for:
 - ✓ A parent interview
 - ✓ A student assessment - Transitional Kindergarten and Kindergarten assessments take place in groups in our classrooms. Elementary and Middle School students are assessed individually.

- FOURTH STEP - LETTERS OF RECOMMENDATION:** Print your child's name, age, and date of birth on the forms and fill out the top portion. After December 1, 2011, give the following documents to your child's current school:
 - ✓ Parent authorization for release of student records (all applicants)
 - ✓ Confidential Recommendation form (TK-K)
 - ✓ Confidential Teacher and Administration Recommendation forms (1st - 8th grade applicants)
 - ✓ Return envelopes (all applicants)Official transcripts will be sent to us directly from schools. These documents must be returned to Heschel no later than February 3, 2012.

- FIFTH STEP - ADMISSION TEST:** For 6th - 8th grade only - Register your child to take the Independent School Entrance Exam (ISEE) listing Abraham Joshua Heschel Day School as a score recipient. The school code for AJHDS is 054172. Please go to www.erbtest.org and click on ISEE. The ISEE may be waived if an applicant submits his/her Educational Records Bureau (ERB) Independent school scores for two consecutive years prior to application, along with a writing sample to be taken at the time of the student's interview.

- SIXTH STEP - ADMISSION DECISION:** Admission decision letters will be mailed on March 23, 2012. Contract and enrollment deposits are due back April 2, 2012 to guarantee your child's space.

- LAST STEP - FINAL REPORT:** For 1st - 8th grade only - In order for your child to start school in September, your school office needs to send Heschel a copy of your child's final June report card, cumulative records, standardized test scores, and student health forms (where applicable).



Application for Admission - page 1

**Optional
Student or Family Photograph**

STUDENT INFORMATION

Applying for Grade: _____ in September of (year): _____

(circle one) Male Female

Full Legal Name: _____ Hebrew Name: _____

Nickname: _____ Date of Birth: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Citizenship: _____ Place of Birth (city, state): _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Languages other than English: _____



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PARENT INFORMATION

Applicant lives with: Mother Father Stepmother Grandparents
(circle all applicable) Mother Father Stepfather Other

Parent One

Parent Two

Parent Names: _____
Relationship to Applicant: _____
Home Address: _____
City, State, Zip: _____
Home Phone: _____
Cell Phone: _____
Email Address: _____
Occupation: _____
Employer: _____
Business Phone: _____
Business Address: _____
City, State, Zip: _____

APPLICANT'S SCHOOL HISTORY

School Name: _____ City: _____
Grade(s): _____ Dates Attended: _____ Phone: _____

School Name: _____ City: _____
Grade(s): _____ Dates Attended: _____ Phone: _____

School Name: _____ City: _____
Grade(s): _____ Dates Attended: _____ Phone: _____



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ADDITIONAL QUESTIONS

Please list any relatives who have attended Abraham Joshua Heschel Day School.

Name: _____ Relationship: _____ Dates Attended: _____

Name: _____ Relationship: _____ Dates Attended: _____

Please list any siblings NOT currently enrolled at Abraham Joshua Heschel Day School.

Name: _____ Birthdate: _____ Gender: _____

Present School/Grade: _____

Name: _____ Birthdate: _____ Gender: _____

Present School/Grade: _____

Name: _____ Birthdate: _____ Gender: _____

Present School/Grade: _____

How did you hear about Abraham Joshua Heschel Day School?

Are you currently affiliated with a synagogue or Jewish community center? If so, which one(s)?

Please complete this application and return in the enclosed envelope with a non-refundable application fee of \$125.00.

I/We certify that the information provided on this application is true and accurate.

Parent One Signature: _____ Date: _____

Parent Two Signature: _____ Date: _____



Student Information: About Your Child

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TO BE COMPLETED BY THE PARENT(S)

What would you like us to know about your child?

Please describe the educational environment at your child's current school.

Why are you interested in Heschel for your child and family?

Does your child have any special interests/talent in music, art, religion, athletics, academics, etc.?

Please provide any other information you feel would be useful in the application process.

I/We certify that the information provided on this application is true and accurate.

PARENT ONE SIGNATURE

DATE

PARENT TWO SIGNATURE

DATE



Release of Student Records

Parent Authorization



In order to complete your child's application, we need to receive information from his/her current school.
Please complete the information below and submit this release to your child's current school.

Student's Name: _____

CURRENT SCHOOL INFORMATION

Name of School: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____

Authorization is hereby given for the transfer of all necessary information for the above student.
This may include written and verbal recommendations, evaluations, copies of report cards,
official transcripts of grades, and standardized test results. I/We understand and agree
that all recommendations and evaluations are confidential and will not be disclosed to me/us.

Signature of Parent or Guardian: _____

Date: _____

Please send all records to:

Abraham Joshua Heschel Day School
Admission Office
17701 Devonshire Street
Northridge, CA 91325



CONFIDENTIAL - Transitional Kindergarten - Kindergarten

Recommendation - Page 1

TO THE PARENT:

Please complete the information requested below and submit this form to your child’s current school.

Student’s Name: _____ Age: _____

Date of Birth: _____ Applying for Grade: _____ in September of: _____

TO THE SCHOOL:

Administrator/Teacher’s Name: _____ Title/Position: _____

Current School: _____ Phone: (_____) _____

Current School Address: _____ City, State, Zip: _____

Abraham Joshua Heschel Day School, a community Jewish day school, provides a rich dual-curricular education that encourages independent and critical thinking, lifelong learning, self-awareness, and compassion. In partnership with our families, we inspire our students to become active, dedicated, ethical, and informed citizens and leaders who are committed to Israel and the vitality of the Jewish people.

Your completion of this evaluation will help us ensure that the child’s next school be an appropriate one for both student and family. Your valued observations will be used solely for the admission process. The professional comments you share will be held in STRICTEST CONFIDENCE. Thank you for providing your insights.

In the space below, please share with us your observations relating to this student’s academic ability, work habits, initiative, divergent thinking, relationships with peers, classroom behavior, attitude, and emotional maturity. If you need additional space, please feel free to attach a separate letter.

SOCIAL AND EMOTIONAL DEVELOPMENT	MATURE	AGE APPROPRIATE	NEEDS DEVELOPMENT	IMMATURE
LISTENS				
COOPERATES				
RELATES TO PEERS				
EXHIBITS SELF-CONFIDENCE				
ADJUSTS TO TRANSITIONS				
TOLERATES FRUSTRATION				
SEPARATES FROM PARENTS				
SHARES MATERIALS AND POSSESSIONS				
FUNCTIONS INDEPENDENTLY				
ASKS FOR HELP WHEN NEEDED				

Comments: _____



CONFIDENTIAL - Transitional Kindergarten - Kindergarten

Recommendation - Page 2

PHYSICAL DEVELOPMENT	MATURE	AGE APPROPRIATE	NEEDS DEVELOPMENT	IMMATURE
FINE MOTOR CONTROL				
GROSS MOTOR CONTROL				
HANDEDNESS ESTABLISHED YES / NO				

COGNITIVE DEVELOPMENT	MATURE	AGE APPROPRIATE	NEEDS DEVELOPMENT	IMMATURE
EXPRESSES IDEAS ORALLY				
ARTICULATES CLEARLY				
SUSTAINS ATTENTION IN SMALL GROUPS				
SUSTAINS ATTENTION IN LARGE GROUPS				
GRASPS CONCEPTS				
RECALLS DETAILS				
DEMONSTRATES AN INTEREST IN LEARNING				
UTILIZES MATERIALS				
FOLLOWS DIRECTIONS				

Are there any special needs or required modifications for this student? Yes: _____ No: _____

If "Yes," please explain: _____

FAMILY INFORMATION	CONSISTENTLY	USUALLY	SOMETIMES	RARELY
COMMUNICATES OPENLY WITH SCHOOL				
PARTICIPATES IN SCHOOL ACTIVITIES				
COOPERATES WITH CLASSROOM TEACHERS				
COOPERATES WITH ADMINISTRATION				
FOLLOWS THE RULES AND POLICIES OF THE SCHOOL				
HAS REALISTIC EXPECTATIONS FOR THIS CHILD				
MEETS FINANCIAL OBLIGATION IN TIMELY MANNER				

Comments: _____

Check here if you would like us to call you to discuss this student in greater detail.

How long have you known this student? _____ First date of enrollment in your school: _____

Signature: _____ Date: _____



Payment Plans: 2011-2012

Tuition and Fees

GRADE		SINGLE PAYMENT	EXTENDED PAYMENTS
Transitional Kindergarten	Tuition	\$12,989	\$13,548
	Tuition Refund Plan	130	135
	Security	575	575
	Program/Activity Fee	275	275
	RETURNING FAMILY - STUDENT TOTAL	13,969	14,533
	New Family Fee	1,350	1,350
	NEW FAMILY - STUDENT TOTAL	15,319	15,883
Kindergarten	Tuition	\$18,517	\$19,357
	Tuition Refund Plan	185	194
	Security	575	575
	Program/Activity Fee	375	375
	RETURNING FAMILY - STUDENT TOTAL	19,652	20,501
	New Family Fee	1,350	1,350
	NEW FAMILY - STUDENT TOTAL	21,002	21,851
Grades 1-5	Tuition	\$21,248	\$22,219
	Tuition Refund Plan	212	222
	Security	575	575
	Program/Activity Fee	375	375
	RETURNING FAMILY - STUDENT TOTAL	22,410	23,391
	New Family Fee	1,350	1,350
	NEW FAMILY - STUDENT TOTAL	23,760	24,741
Grades 6-7	Tuition	\$24,991	\$26,149
	Tuition Refund Plan	250	261
	Security	575	575
	Program/Activity Fee	475	475
	RETURNING FAMILY - STUDENT TOTAL	26,291	27,460
	New Family Fee	1,350	1,350
	NEW FAMILY - STUDENT TOTAL	27,641	28,810
Grade 8	Tuition	\$24,991	\$26,149
	Tuition Refund Plan	250	261
	Security	575	575
	Program/Activity Fee (incl. graduation)	750	750
	RETURNING FAMILY - STUDENT TOTAL	26,566	27,735
	New Family Fee	1,350	1,350
	NEW FAMILY - STUDENT TOTAL	27,916	29,085



Application Request Form

Financial Assistance



If you are interested in applying for financial assistance for the 2012 – 2013 school year, please complete this form and return it with your child's application and the \$125.00 application fee.

Please fill out one form per family, not per applicant.

I/We are interested in applying for financial assistance.

Name of Parents/Guardians: _____

Applicant Name: _____ Applying to Grade: _____

Applicant Name: _____ Applying to Grade: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Please note:

1. Upon receipt of this form you will be contacted via email to receive assistance regarding the application process.
2. You may also access the necessary forms through our website at www.heschel.com.
3. In the case of divorced or separated parents, it is the policy of Heschel Day School that both parents and/or guardians will contribute to the costs of educating their child. Please note that the deadline for receipt of financial assistance paperwork for new applicant families is February 3, 2012.

Please be assured that all information submitted will be kept in the strictest confidence.