



New Student Admission Application

Academic Year: 2024-25

PERSONAL INFORMATION

ENTERING GRADE _____

Applicant's Legal Name: _____ Gender: _____
FIRST MIDDLE LAST

Preferred Name: _____ Hebrew Name: _____ Birth date: _____ Age: _____
(IF KNOWN)

Birthplace: _____
CITY COUNTRY

Address: _____ Home Phone: _____
STREET CITY STATE ZIP

Home School District: _____

Current School: _____ Current Grade: _____

Previous School Attended: _____ Dates: _____

Previous School Attended: _____ Dates: _____

Synagogue Affiliation, if any (optional): _____

Has a sibling previously attended Hillel Community Day School? No Yes _____
NAME CURRENT GRADE

FOREIGN LANGUAGE FLUENCY

Language(s) spoken at home: _____

Name of Language	Speaking Level	Reading Level	Writing Level

PARENT/GUARDIAN INFORMATION

Household Status (please mark all that apply)

Married *Divorced *Separated Single Parent Household Father Deceased Mother Deceased
 *Father Has Custody *Mother Has Custody *Joint Custody Student Lives with Step-Parent
 Other: _____

*If parents are separated or divorced, you must attach a current copy of the custody agreement.

PARENT/GUARDIAN #1

Best way to contact: Home Cell Work E-mail

Title: _____ Name: _____
(Dr./Mr./Ms./Mrs.) FIRST LAST

Address: _____
STREET CITY STATE ZIP

HOME PHONE CELL PHONE WORK PHONE PREFERRED E-MAIL ADDRESS

Schools/Colleges attended: _____

Occupation & Company: _____
(IF STUDENT, PLEASE LIST SCHOOL NAME)

PARENT/GUARDIAN #2

Best way to contact: Home Cell Work E-mail

Title: _____ Name: _____
(Dr./Mr./Ms./Mrs.) FIRST LAST

Address: _____
STREET CITY STATE ZIP

HOME PHONE CELL PHONE WORK PHONE PREFERRED E-MAIL ADDRESS

Schools/Colleges attended: _____

Occupation & Company: _____
(IF STUDENT, PLEASE LIST SCHOOL NAME)

EMERGENCY CONTACT

Best way to contact: Home Cell Work E-mail

Title: _____ Name: _____
(Dr./Mr./Ms./Mrs.) FIRST LAST

Address: _____
STREET CITY STATE ZIP

HOME PHONE CELL PHONE WORK PHONE PREFERRED E-MAIL ADDRESS

ADDITIONAL FAMILY INFORMATION

Other children in the family:

NAME	BIRTHDATE	CURRENT SCHOOL / DAYCARE

Other family members who attended Hillel Community Day School

Grandparents:

Paternal Grandparents

Name: _____

Address: _____

Email: _____

Maternal Grandparents

Name: _____

Address: _____

Email: _____

STUDENT'S EDUCATIONAL NEEDS:

Does your child have an Individualized Educational Plan ("IEP")? No Yes (If yes, please attach a copy of the IEP.)

Does your child have a 504 Plan No Yes

Has your child received any type of assistance or counseling outside of the classroom? No Yes

If yes, please indicate the nature of any special needs or learning challenges:

Are there any medical facts that we should know about that will help us meet your child's needs (such as chronic health issues, physical accommodations, treatment for emotional concerns)? If yes, please indicate how you and the student's current school have provided support:

APPLICATION FEE & TUITION

I understand that my application is not complete without the \$300.00 application fee. The application fee is non-refundable, but is applicable to tuition. I have submitted this fee via the Hillel School website.

I have reviewed the 2024-2025 Tuition fees.

I/we expect to apply for financial aid through FACTS **OR**

I/we do not expect to apply for financial aid through FACTS.

I/We understand that the withholding of information or incorrect information may disqualify the applicant for admission or may be used later for the applicant's withdrawal and forfeiting of fees.

Parent/Guardian #1: _____
PRINT NAME SIGNATURE DATE

Parent/Guardian #2: _____
PRINT NAME SIGNATURE DATE

PLEASE SHARE WITH US

How did you learn about Hillel Community Day School? (Please mark all that apply and specify publication, media channel, or event)

Current Parents Past Parents Current Student(s) Past Student(s) Friends/Relatives

Website Yellow Pages Television/News: Magazine Ad: _____

Attended Event: _____ Newspaper Article: _____ Magazine

What are the key factors influencing your application to Hillel Community Day School? (Please mark all that apply)

Dedication to Judaism Hebrew Language Differentiated Learning Faculty

Uniquely Integrated Curriculum Close-Knit Community Music & Arts Program

Math & Science Program Reputation Class Size & Individual Attention Facilities Safety