



The Jeanie Schottenstein
Center for Advanced Torah
Study for Women

Alisa M. Flatow Building, Berel Locker 26A, Pat, Jerusalem, 93282, Phone: +972-2-640-4333 Fax: +972-2-640-4353

2012 Application for Summer Institute

Instructions:

- Please print or type clearly.
- Admissions and financial aid decisions are made on a rolling basis, so please apply early.
- Please send the **completed application form, application fee** (or form authorizing credit card payment) and **two current photos** to Nishmat via:
EMAIL: nishmatsummer@nishmat.net
MAIL: Nishmat, Berel Locker 26A, Pat, Jerusalem, 93282, Israel
or FAX: +972-2-640-4353.
- Please print a copy of this application for your files.

If you have any questions about this application, or about Nishmat, please contact us at nishmatsummer@nishmat.net.

We look forward to receiving your application!

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Summer 2012 Fees

Application Fee	\$50
Tuition	\$750
Dormitory (optional)	\$450

Discounts are available to **Nishmat alumnae** *and* to holders of an **Israeli Teudat Zehut**. Please contact us at nishmatsummer@nishmat.net

Financial Assistance may be available from your synagogue, Federation, JCC or Hillel. In addition, Jeff Seidel's Jewish Student Information Center website (<http://www.jeffseidel.com>) offers scholarships for study in Israel, and has an extensive list of other scholarships.

If you require additional financial assistance from Nishmat, please request a Financial Aid form. Nishmat offers limited, need-based Financial Aid (long-term payment packages, and/or tuition reductions) on a first-come, first-served basis.

Nishmat Summer Institute 2012

1. Name:	First	Last:	Hebrew:
2. Application for: Full Time__ Half Time__ Individual Course(s)_____			
3. Date of Birth (dd/mm/yy):			
4. Are you applying for a space in the Nishmat dormitory (FULL TIME STUDENTS ONLY)? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, have you ever lived away from home before? Yes <input type="checkbox"/> No <input type="checkbox"/> Enter years: Summer Camp__ College__ Abroad__ Independently__			
5. Current Address and Phone Numbers			
	Address:		
	Phone:	Cell:	
	Email:		
6. Permanent Address and Phone Numbers			
	Address:		
	Phone:	Cell:	
7. Citizenship (Please fill in ALL relevant information)			
	Nationality:	Passport Number:	
	Te'udat Zehut Number: <small>(Israeli Citizens residing in Israel are eligible for reduced tuition tuition)</small>	Date of Aliyah:	
	If U.S. Citizen, Social Security number:		
8. Family Information			
Marital Status: Single _____ Married _____ Divorced _____ Widowed _____			
(If relevant)	Spouse's Name:		Number of Children:
Father:	Name:	Hebrew Name:	Occupation:
	Address:		Nationality:
	Phone:	Email:	
Mother:	Name:	Hebrew Name:	Occupation:
	Address:		Nationality:
	Phone:	Email:	

Nishmat Summer Institute 2012

9. Jewish Background		
What was the religion of your family growing up?		
Is/Was your father Jewish? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is/Was your mother Jewish? <input type="checkbox"/> Yes <input type="checkbox"/> No
If you were not raised Jewish, are you Jewish today?		
If you converted		
Name of Rabbi who supervised and authorized your conversion:		
Name of Beit Din:		
City:		Date:
10. Medical Information (Confidential)		
Do you have any medical conditions that affect your study at Nishmat? No__ Yes__		
If yes, please specify:		
Are you taking any medications? No__ Yes__ Specify:		
Are you under a doctor's care? No__ Yes__ Specify:		
Are you receiving mental health counseling? No__ Yes__ Specify:		
Psychiatric care? No__ Yes__ Specify:		
11. Present Occupation		
Occupation:		
Place of work:		
Position:		
12. Education		
Secondary	Name:	Year Graduated:
	City	
College	Name:	Year Graduated:
	Major	City:
Other	Name:	Year Graduated:
	Major	City:
12. Jewish Education, if different from answer 12		
School	Name:	Year Graduated:

Nishmat Summer Institute 2012

	Address:	
School	Name:	Year Graduated:
	Address:	
13. What synagogue or minyan do you attend?		
Name:		Rabbi:
City:		
14. Please provide us with a name and contact information of someone who can provide a personal reference for you:		
Name:		Email:
Cell Phone:		Landline:
15. How did you hear about Nishmat?		
	Brochure__ Alumnae__ Staff__ Web Site__ Other__ Please specify:	

Signature of Applicant: _____ Date: _____

Nishmat Summer Institute 2012
Permission to Charge Credit Card
Deposit and Credit Card Form

Applications will not be processed without the application fee.

Payment may be made by credit card (by filling out the form below) or by check. Please mail checks to Nishmat, Berel Locker 26A, Jerusalem 93282, ISRAEL.

Please complete this form and email to nishmatsummer@nishmat.net or fax to +972.2.640.4353.

Student's Name _____

Dates of attendance _____

Credit Card Information:

1. Type of card _____

2. Card number _____

3 additional digits on the back of the card _____

3. Expiration date _____

4. Cardholder's name _____

5. Cardholder's address _____

6. Cardholder's phone number _____

7. Cardholder's passport number (including country) _____

I authorize Nishmat to charge this credit card for all payments (e.g. tuition, dormitory, telephone calling card, e-mail) for the above-mentioned student.

Cardholder's signature _____

Date _____

Please note: This information is kept in your file as a guarantee of all payments and charges at Nishmat. Your credit card will not be charged without first informing you.

Thank you for your cooperation.