

# BAIS TORAS MENACHEM

341 N. MANSFIELD, LOS ANGELES, CA 90036  
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BTM@SMICHA.NET WWW.SMICHA.NET

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## Application for Admission

Application must be accompanied with a \$75.00 application processing fee — please see page 3

Father

### PART I – Parental Information

Mother

Legal Name	Legal Name
Full Hebrew Name	Full Hebrew Name
Address	Address (if different)
City State Zip	City State Zip
Home Cell	Home Cell
Occupation Business name	Occupation Business name
Work Address	Work Address
City State Zip	City State Zip
Work Phone Fax	Work Phone Fax
Email	Email
Billing Address	City State Zip

### PART II – Student Information

Legal Name	Full Hebrew Name
Date of Birth (Legal)	Date of Birth (Hebrew)
Cell Number	Email
Place of Birth (City, State, Country)	Social Security Number
Student Resides With <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian (please attach sheet with name, address, and contact info)	

### PART III – Educational Information

Current/Most Recent School Attended	Phone
Maggid Shiur Mashpia	Grade Level
Dates Attended / Until /	Was this a good school for applicant (Why/why not? Please explain below)
Previous School Attended	Phone
Maggid Shiur Mashpia	Grade Level
Dates Attended / Until /	Was this a good school for applicant (Why/why not? Please explain on next page)

Previous School Attended

Phone

Maggid Shiur

Mashpia

Grade Level

Dates Attended / Until / Was this a good school for applicant (Why/why not? Please explain below)

**PART IV – Secular Studies Information**

Last Grade Level of Secular Studies Completed

Name of School

Student Has ☐ High-School-Diploma ☐ GED ☐ Neither**PART V – Personal Information**

Does Student Have a Mashpia/Rabbi/Bochur Who He Is Close With? If Yes, Please Specify

Name

Phone

Email

Please List Additional Reference

Name

Relationship To Applicant

Phone

Email

If Time Elapsed Since Student Last Attended School, How Was It Spent?

How Has Student Spent The Past Two Summers?

Does Student Have Any Special Learning Needs? ☐ No ☐ Yes If Yes, Please DescribeDoes Student Have Any Special Physical or Emotional Needs? ☐ No ☐ Yes If Yes, Please Describe

Please List Any Professionals Who May Have Worked With The Student, (E.g., Educational Therapists, Psychologists, Tutors, Social-Workers, etc.)

Name

Phone

Name

Phone

Please Describe Any Special Talents/Skills Student Has (E.g., musical, construction, leining, lifeguarding, etc.)

Please List Student's Extracurricular Interests

In a Few Sentences, Please Describe Student's Goals Both Religiously and Academically

**PART VI – Student Conduct – To Be Completed By Parent**

Please describe your son's **attitude** in the following areas: Scale 1 through 5; 1 being the lowest and 5 being the highest

	1	2	3	4	5		1	2	3	4	5
Work Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yiras Shamayim	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethics and Honesty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Respect to Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerance Threshold	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Respect of Halacha	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Interactions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Appropriate Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PART VII – Statement of Interest**

Please Describe Why Student Is Interested In Joining BTM? Why Would BTM Be A Good Fit For Student? Feel Free To Include Some Of Student's Accomplishments. Attach Additional Paper If Necessary

Is There Any Other Factors That You Would Like Us To Consider In Evaluating You Application?

**PART VII – Application Processing fee**

*Application will not be processed until \$75 processing fee is received*

**Method of Payment**

☐ I Would Like To send a Check For \$75

☐ Please Charge My Credit Card For \$75

<input type="checkbox"/> A Check Is Enclosed (With application)	Card #
<input type="checkbox"/> A Check Will Arrive In The Mail (If application is emailed/faxed)	Exp Date (mo/yr) / CVC Card Type
Pleas Send Check to: Bais Toras Menachem	Billing Address
341 N. Mansfield Ave. Los Angeles, CA, 90036	City State Zip

I, the undersigned, have completed the above application to the best of my knowledge

Student Signature	Date	Parent Signature
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Completed applications can be scanned and sent as an email attachment to [BTM@Smicha.net](mailto:BTM@Smicha.net) or can be mailed to Bais Toras Menachem, 341 N. Mansfield Ave. Los Angeles, CA, 90036; or faxed to 323-936-2745