



PROSPECT PARK OF MONSEY

APPLICATION FOR ADMISSION

Application for Grade: _____
School year: תשפ"ו 2025-26

A. APPLICANT

1. Child's name (name she is called) _____
Last First Hebrew Spelling

Legal name _____
Last First

2. Date of birth ____ / ____ / ____ _____
Month / Day / Year Hebrew birthday

3. Social security number _____ U.S. Citizen

4. Home address _____
City State Zip

5. Home phone _____

6. Previous education: (Please list all schools including Playgroup and Day Care)
Name of School Grade Phone # of School Dates of Attendance

7. Current teacher: _____
Name Phone Number

8. Child's country of origin (if other than U.S.) _____ Date of Arrival in U.S. _____

9. Languages spoken at home _____

10. List some of your child's interests/hobbies _____

11. Has your child experienced any serious illness or accident?
Please be specific as to the date and nature of illness/accident.

12. List any special needs (physical, academic, emotional, etc.) to which we should be sensitive:

FOR OFFICE USE:

Complete Documentation

Interview scheduled _____

13. Has your child ever received and/or currently receiving any support services? Including but not limited to: social, emotional, behavioral, educational, PT, OT, speech, SEIT or other (please specify) Yes No
 If yes, please explain and attach a copy of the evaluation(s) and her IEP so we can help foster her development:
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14. Does your child have any severe allergy that the school needs to be aware of? Yes No
 If yes, please attach all relevant documents.

B. PARENTS

	FATHER	MOTHER
Title		
First name		
Hebrew name		
Maiden name	n/a	
Cell phone number		
Email address		
Address if different from child		
Place of birth		
Shul affiliation	Shul Name:	Address:
	Shul Rav: (first and last)	Rav's Phone #:
Occupation		
Firm name		
Firm address		
Firm phone number		
Relationship to owner		
E.S. attended		
H.S. attended		
Post high school education	Bais Medrash:	Seminary:
	College:	College:
Highest degree earned		
Family Rav	Rav's Name: (first and last)	
	Rav's Phone #:	
Do you attend a shiur or have a chavrusa? ___ Yes ___ No		
Name of Maggid Shiur/Chavrusa _____ Phone number _____		
Marital status: Married Separated Widowed Divorced Second Marriage		

C. SIBLINGS

Brother's/Sister's Name	DOB	Age	School	Grade or Year Graduated

D. GRANDPARENTS

	Name	Mailing address (include city, state, and zip)	Telephone #
Paternal			
Maternal			

E. OTHER

1. What is the reason for transferring to Bnos Leah Prospect Park of Monsey?

2. Referred by _____

3. What attracted you to Bnos Leah Prospect Park of Monsey?

4. List two references:

Name	Telephone Number	Relationship

All questions must be answered completely, and the following items attached for this application to be considered:

1. Recent photo of your child
2. A copy of your child's birth certificate
3. Child's immunization records
4. Previous year's limudei kodesh and chol report cards (for grades 2-8)
5. IEP and/or psychological evaluations (if applicable)

I give permission for Bnos Leah to contact my child's previous school(s).

I hereby apply for my child to be admitted to Bnos Leah Prospect Park of Monsey. I am enclosing all requested documents. I give permission to my child's current school to release all information (academic, social, and health records) to Bnos Leah Prospect Park of Monsey. All information sent to us will remain confidential.

Father's signature

Date

Mother's signature

Date