

## YESHIVA KEREN HATORAH of Passaic-Clifton

### TUITION AND FEE SCHEDULE 2024-2025

#### Tuition and Basic Fees

Registration \$500.00

Tuition \$15,800.00\*

Mesivta Dinner \$500.00

Activity Fee \$195.00 Includes books (but does not include seforim, chagigos and siyumim, and the yeshiva shabbosim)

#### Optional Meal Fees

Breakfast is included

Lunch \$725.00

Supper \$350.00

\*If you need assistance with the tuition, please contact us and we will send you an application.

HIGH SCHOOL APPLICATION FORM 2024

PLEASE ATTACH  
RECENT PHOTO

LAST NAME: \_\_\_\_\_ FIRST NAME (LEGAL): \_\_\_\_\_ GOES BY: \_\_\_\_\_

HEBREW NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOME #: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ HEBREW NAME: \_\_\_\_\_

MOTHER'S NAME: \_\_\_\_\_ HEBREW NAME: \_\_\_\_\_

PARENTS' MARITAL STATUS:  MARRIED  DIVORCED  SEPARATED  WIDOWED

FATHER'S OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

CELL#: \_\_\_\_\_ WORK #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MOTHER'S OCCUPATION: \_\_\_\_\_ EMPLOYER: \_\_\_\_\_

CELL#: \_\_\_\_\_ WORK #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

NAME OF SHUL WHERE APPLICANT'S FAMILY DAVENS: \_\_\_\_\_

RAV'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

PATERNAL GRANDPARENTS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MATERNAL GRANDPARENTS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**LIST BROTHERS AND SISTERS IN ORDER OF AGE AND ALL SCHOOLS ATTENDED BY EACH:**

NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

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NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

NAME: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

PLEASE ATTACH AN ADDITIONAL PAPER IF ADDITIONAL SPACE IS NEEDED

NAME OF YESHIVA CURRENTLY ATTENDING: \_\_\_\_\_ GRADE: \_\_\_\_\_

CURRENT REBBI: \_\_\_\_\_ PHONE: \_\_\_\_\_

LAST YEAR'S REBBI: \_\_\_\_\_ PHONE: \_\_\_\_\_

WHICH מסכת AND פרק IS THE APPLICANT CURRENTLY LEARNING? \_\_\_\_\_

WHICH פרקים/מסכתות DID HE LEARN IN 6TH AND 7TH GRADE? \_\_\_\_\_

**IF APPLICANT HAS ATTENDED OTHER SCHOOLS, PLEASE LIST THEM BELOW:**

NAME OF SCHOOL: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATES ATTENDED: \_\_\_\_\_

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NAME OF SCHOOL: \_\_\_\_\_ PHONE: \_\_\_\_\_ DATES ATTENDED: \_\_\_\_\_

HOW DID THE APPLICANT SPEND THE PAST TWO SUMMERS? \_\_\_\_\_

PLEASE SPECIFY WHICH (IF ANY) REGENTS COURSES YOU ARE TAKING THIS YEAR \_\_\_\_\_

DOES YOUR SON RECEIVE ANY ACADEMIC SUPPORT IN OR OUT OF SCHOOL? IF YES FOR WHICH SUBJECTS? \_\_\_\_\_

DESCRIBE ANY SPECIAL MEDICAL NEEDS YOUR SON MAY HAVE: \_\_\_\_\_

WHO RECOMMENDED YESHIVA KEREN HATORAH \_\_\_\_\_

*Attendance at the Yeshiva is a privilege, not a right. It is understood that the registration of all students admitted to the school is subject to the following conditions: The school reserves the right to require withdrawal of any student at any time for any reason which it deems sufficient. Attendance at the school is dependent upon the maintenance of regular and satisfactory work, both in the hebrew and secular departments. The student is required to familiarize himself with and to abide by all regulations of the Yeshiva. Students are expected to uphold the moral principles of the Yeshiva at all times, both in the Yeshiva and in their outside activities.*

**WE HEREBY CERTIFY THAT THE INFORMATION GIVEN IN THIS APPLICATION IS COMPLETE AND ACCURATE.  
WE UNDERSTAND THE EDUCATIONAL POLICY OF YOUR SCHOOL, AND THIS APPLICATION IS FILLED WITH OUR  
KNOWLEDGE, CONSENT AND APPROVAL.**

DATE: \_\_\_\_\_

FATHER'S SIGNATURE: \_\_\_\_\_ MOTHER'S SIGNATURE: \_\_\_\_\_

APPLICATION FEE OF \$100 WILL BE PAID VIA:  CHECK (60 ALBION STREET, PASSAIC NJ)  CREDIT CARD

NAME ON CARD \_\_\_\_\_ CARD NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ CVV \_\_\_\_\_ SIGNATURE \_\_\_\_\_

**APPLICATION DEADLINE: DECEMBER 15**

**PLEASE RETURN THE COMPLETED FORM AND RECENT PHOTO OF APPLICANT TO [OFFICE@YKHPC.COM](mailto:OFFICE@YKHPC.COM)  
OR MAIL TO 60 ALBION STREET, PASSAIC NJ 07055**

APPLICATIONS CANNOT BE PROCESSED UNTIL THE COMPLETED PRINCIPAL REPORTS AND REPORT CARDS HAVE  
BEEN RECEIVED DIRECTLY FROM YOUR SON'S SCHOOL.

NO APPLICANT IS CONSIDERED ACCEPTED WITHOUT A LETTER OF ACCEPTANCE.

**מְנֵה'ל REPORT**

PLEASE COMPLETE THE ENCLOSED FORM. ALL INFORMATION WILL BE KEPT STRICTLY CONFIDENTIAL.  
 THANK YOU FOR YOUR COOPERATION.

APPLICANT'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ מְנֵה'ל NAME: \_\_\_\_\_ מְנֵה'ל PHONE: \_\_\_\_\_

PLEASE RATE THE APPLICANT TO THE BEST OF YOUR ABILITY IN EACH CATEGORY BELOW FROM 1-5  
 (1 = UNACCEPTABLE 5 = EXCELLENT)

גמרא READING	
גמרא UNDERSTANDING	
כשרונות	
EFFORT	
CLASSROOM PARTICIPATION	
BEHAVIOR	
MATURITY	
CLASS ATTENDANCE AND PUNCTUALITY	

תפילה	
תפילה – ATTENDANCE	
RESPONSIBILITY	
HONESTY	
LEADERSHIP ABILITY	
RELATIONSHIP WITH PEERS	
RELATIONSHIP WITH ADMINISTRATION & RABBEIM	
PARENTAL PARTICIPATION	

DESCRIBE ANY LEARNING DISABILITIES, PERSONAL OR FAMILY ISSUES THAT HAVE AFFECTED OR MAY AFFECT HIS ABILITY TO PERFORM IN SCHOOL: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

IF THE STUDENT HAS BEEN SUSPENDED IN THE PAST 3 YEARS, PLEASE LIST THE DATES AND DETAILS OF EACH SUSPENSION:

\_\_\_\_\_

\_\_\_\_\_

**DESCRIBE THE STUDENT'S GREATEST STRENGTH AND HIS GREATEST CHALLENGE** \_\_\_\_\_

**ADDITIONAL RELEVANT INFORMATION OR COMMENTS:** \_\_\_\_\_

**מנהל'S SIGNATURE:** \_\_\_\_\_

RETURN COMPLETED FORM TOGETHER WITH A COPY OF THE APPLICANT'S 7TH AND 8TH GRADE  
**לימודי קודש** REPORT CARDS DIRECTLY TO **OFFICE@YKHPC.COM**  
OR MAIL TO **60 ALBION STREET, PASSAIC NJ 07055**

APPLICATIONS CANNOT BE PROCESSED WITHOUT THIS COMPLETED FORM AND THE REPORT CARDS.

## GENERAL STUDIES PRINCIPAL'S REPORT

PLEASE COMPLETE THE ENCLOSED FORM. ALL INFORMATION WILL BE KEPT STRICTLY CONFIDENTIAL.  
 THANK YOU FOR YOUR COOPERATION.

APPLICANT'S NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ PRINCIPAL'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

PLEASE RATE THE APPLICANT TO THE BEST OF YOUR ABILITY IN EACH CATEGORY BELOW FROM 1-5  
 (1 = UNACCEPTABLE 5 = EXCELLENT)

ACADEMIC PERFORMANCE	
CLASSROOM PARTICIPATION	
EFFORT	
MOTIVATION	
BEHAVIOR	
MATURITY	
CLASS ATTENDANCE AND PUNCTUALITY	

INTELLECTUAL ABILITY	
RESPONSIBILITY	
HONESTY	
LEADERSHIP ABILITY	
RELATIONSHIP WITH PEERS	
RELATIONSHIP WITH ADMINISTRATION & TEACHERS	
PARENTAL PARTICIPATION	

DESCRIBE ANY LEARNING DISABILITIES, PERSONAL OR FAMILY ISSUES THAT HAVE AFFECTED OR MAY AFFECT HIS ABILITY TO PERFORM IN SCHOOL: \_\_\_\_\_

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IF THE STUDENT HAS BEEN SUSPENDED IN THE PAST 3 YEARS, PLEASE LIST THE DATES AND DETAILS OF EACH SUSPENSION:

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DESCRIBE THE STUDENT'S GREATEST STRENGTH AND HIS GREATEST **CHALLENGE** \_\_\_\_\_

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ADDITIONAL RELEVANT INFORMATION OR COMMENTS: \_\_\_\_\_

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PRINCIPAL'S SIGNATURE: \_\_\_\_\_

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