



North American
Application for 2010-11

General Information: Date: _____

Name (as it appears on passport):

First _____ Middle _____ Last _____

Name you prefer to be called (if different): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone number: (H) _____ (Cell) _____

Email: _____

Date of Birth: _____ Social Security Number: _____

Place of Birth: _____ Citizenship: _____

Passport Number: _____ **Passport Expiration Date:** _____

Father's Full Name: _____

Occupation: _____

Address (if different then above): _____

Phone number: (Work) _____ (Cell) _____

Email: _____

Mother's Full Name: _____

Occupation: _____

Address (if different then above): _____

Phone number: (Work) _____ (Cell) _____

Email: _____

Parental Marital Status: _____ (Married, Divorced, Separated, etc.)

Indicate which parent (or both) we can "cc" on correspondence:

Father: _____ **Mother:** _____ **Both:** _____

Siblings:

<u>Name</u>	<u>Age</u>	<u>School</u>
1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____

Personal Information:

1. Have you visited Israel in the past? If so, why, and for how long?

2. If you had to define your Jewish state of mind, would you consider yourself
Satisfied Questioning Inspired Challenged Dis-satisfied Turned Off
3. Growing up, what was your Jewish affiliation? _____
4. What kind of Jewish experiences have you had?

EXPERIENCE	NAME OF PROGRAM	Dates Attended
Day School/Yeshiva		
Summer Camp		
Youth Groups		
After School		
Jewish Trips		
Other		

Educational Background:

School Name	Dates Attended

5. Please list extra curricular activities & hobbies that you have been involved in (Activities and affiliations in addition to above; Sports, Associations, Clubs etc) :

6. List any additional Achievements (Awards, Certifications, memberships):

7. What is your favorite book? _____

8. What is your favorite movie? _____

9. Please rate the following between 1-5. **1= Poor 3 =Average 5 = Excellent**

My knowledge of Hebrew:

Reading	1	2	3	4	5
Writing	1	2	3	4	5
Speaking	1	2	3	4	5
Understanding	1	2	3	4	5

Medical:

8. Pre-existing medical/mental condition or learning difficulties (please specify): _____

9. Medications taken regularly: _____

Essays: (Please submit **BOTH** essays along with the application)

Please submit a *HANDWRITTEN* essay on the following topic:

- Why you think Orayta is the place for you and how it differs from other options (100-150 words)

In addition, please submit a typed essay on the following topic:

- What are the three questions/issues that most challenge you about being Jewish, your experience with Jewish education thus far, and/or living a daily Torah life. Elaborate on any conclusions you have entertained as possible solutions to these questions/issues.

Letters of Recommendation AND References:

Please forward two **Letters of Recommendation**, at least one of which is from a Rabbi or Jewish educator who has known you for a period of at least one year.

Please ask those who write letters of recommendation to include:

- a. the name of the organization they represent; and
- b. an address, phone number and email for any follow-up questions.
 1. **Name:** _____ Relationship _____
Tel: _____ **E-mail:** _____
 2. **Name:** _____ Relationship _____
Tel: _____ **E-mail:** _____

AND

Please list two additional References with Contact info:

1. **Name:** _____ **Tel:** _____ **E-mail:** _____
Nature of the relationship with the applicant: _____
2. **Name:** _____ **Tel:** _____ **E-mail:** _____
Nature of the relationship with the applicant: _____

Signatures:

Student Signature: _____ **Date:** _____
Parent's signature: _____ **Date:** _____

Please go back and double check that you have filled in ALL the points of information and blanks in this form.

If you cannot submit all the following items right away, please submit your application form & essay and application fee TOGETHER. SEND the other items together as soon as they are available. The Acceptance Committee cannot meet on your application until all the items below are submitted.

After completing the form, please print it then scan and email / or fax / or mail application and essay, along with:

- High School transcript (It can be a student copy)
(including SAT or ACT scores if available - not required)
- Recent digital or passport-sized photo (scanned in jpg format, if possible)
- Copy of the first page of your passport (scanned in jpg format, if possible)
- \$125 non-refundable application fee

To:

Email: office@orayta.org
Fax: 561-892-0333 (USA)
Mail: Orayta / Isralight
22365 Dorado Drive
Boca Raton, FL 33433

Payment of \$125:

Type of Card: _____

Credit Card Number: _____

Exp. Date: _____

CV2 Security Code: (3 or 4 digit) _____

Name on Credit Card: _____

Name of Student Applicant: _____

Billing Address (if different from home address):

NOTE: To ensure prompt receipt and response please e-mail us at office@orayta.org to inform us your application has been sent.