

Yeshiva currently attending _____

Rebbe's Name _____

Current מסכת _____ פרקים & דפים learned _____

Please list all schools applicant has attended:

Name of School	Location	Attendance	
		From	To

Please list all summer camps attended:

Name of Camp	Location	Attendance	
		From	To

Please list any activities or organized sports you participate in outside of school:

Please note that Shaarei Torah Talmidim may not have any unfiltered smart devices.

PARENTS:

Please comment on your son, especially regarding his personality, motivation or any other area you consider relevant to his application.



ישיבת שערי תורה YESHIVA SHAAREI TORAH

91 West Carlton Road • Suffern, New York 10901 • Phone (845) 352-3431 • Fax (845) 352-3433

MENAHEL'S EVALUATION

Menahalim are kindly requested to please fill out this evaluation form and return it directly to our office.

Fax: (845) 352-3433 or email: office@yst.edu

Yeshiva Shaarei Torah, 91 W. Carlton Road, Suffern, New York 10901

PLEASE NOTE: The information provided will be held in strict confidence.

Name of Talmid _____ School _____

	EXCELLENT	GOOD	AVERAGE	BELOW AVERAGE
שמירת המצות				
Davening				
Scholastic Ability				
Effort/Participation				
Classroom Behavior				
Emotional Stability & Self Confidence				
Motivation/Academic Interest				
Attendance & Punctuality				
Peer Relationships				
Sense of Responsibility				

Please comment on your observation of the Talmid's outstanding strengths, weaknesses, social skills, academic skills, or relevant information we should be aware of:

Please include a copy of the talmid's 7th and 8th grade report cards, both in Limudei Kodesh and General Studies.

Menahel's Name _____

Menahel's Signature _____ Telephone Number _____