Information for BA/Semicha Program Candidates

Yeshiva University and its affiliate Rabbi Isaac Elchanan Theological Seminary have a long and rich history as an outstanding Yeshiva with the finest roshei yeshiva and talmidim. In keeping with this tradition, Yeshiva University has inaugurated the BA/Semicha Program. This new program allows students interested in Jewish education or the rabbinate to pursue a quality undergraduate degree, while fully immersed in the Torah that YU has to offer. Over the course of six years, talmidim will have the ability to learn three sedarim a day and enjoy a unique halacha curriculum, including a chelek of Mishna Berura each year.

How To Apply

To apply to the BA/Semicha Program, students must:

- Have already applied to Yeshiva College or Sy Syms School of Business–Wilf Campus.
- Complete this application.
- Solicit two confidential letters of recommendation from individuals who can speak to your character, as well as growth, achievements and future potential in learning. Recommendations can be mailed, faxed or emailed.
- After applications are reviewed, eligible candidates will be contacted in order to schedule an interview and bechina.

If you are applying from outside of Israel

- Send application and all supporting documents to:
  Yeshiva University
  Office of Admissions
  500 West 185th Street, F101
  New York, NY 10033
  Phone: 646.592.4440
  Fax: 646.390.1816
  email: yuadmit@yu.edu

If you are applying from Israel

- Send application and all supporting documents to:
  Yeshiva University in Israel
  S. Daniel Abraham Israel Program
  40 Baruch Duvelvani
  Jerusalem, Israel 96428
  Phone: 02.531.3020
  Fax: 02.531.3021
  email: sdaip@yu.edu
APPLICANT DATA

Legal Name ___________________________________________ Last Name First Name Middle Name/Initial

Preferred Name ___________________________________________ Hebrew Name _______________________________

YU ID#________________________________________

Home Address
Number and Street ____________________________ Mailing Address (if different)
City State Zip Number and Street
City State Zip

Phone ____________________________ Israel Cell

Email ____________________________

Please list all post-high school yeshivos that you have attended.

Present Yeshiva Location Date Attended Rebbeim
Previous Yeshiva Location Date Attended Rebbeim
Previous Yeshiva Location Date Attended Rebbeim

With which shul are you affiliated?

Shul Location Rabbi

LEARNING, ACTIVITIES AND INTERESTS

Please list which mesechtos you have learned in the past two years. Indicate which blatt were covered b’iyun and which b’bikiyus:
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________

Please list relevant extracurricular activities:
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________

Describe your summer activities:
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________

List scholarships, prizes or awards you have received both in and out of school:
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________

Please share with us on a separate page why you are interested in the field of chinuch or rabbanus and why you think this program is appropriate for you:
___________________________________________________________________________________________________________________
___________________________________________________________________________________________________________________

REQUIRED SIGNATURE

This certifies that all information contained in this application is complete, accurate and prepared to the best of the applicant’s ability.
THE FOLLOWING INFORMATION TO BE COMPLETED BY THE APPLICANT

This form is to be given to a person familiar with your qualifications. Please complete the top section of this form and give to a reference of your selection. Recommendations coming from within the United States should be mailed to the Office of Admissions in New York, faxed to 646.390.1816 or emailed to yuadmit@yu.edu. Recommendations coming from Israel should be mailed to the Yeshiva University Office in Jerusalem, faxed to 02.531.3021 or emailed to sdaip@yu.edu. Recommendations sent via email should include the same information that is requested on this form.

Last Name | First | Middle
---|---|---
Street Address
City | State | Zip | Home Phone Number
Date of Birth | Email Address

RECOMMENDATION

The above-named person is applying for admission to the BA/Semicha Program. This program seeks to identify undergraduate students who show potential in the field of chinuch and Rabbanus and demonstrate commitment to talmud Torah. Please comment on the candidate’s abilities and potential, his middos, hasmada and yiras shamayim. Kindly supply any additional information that might help the BA/Semicha Program committee understand why you think this talmid would be a good match for the program.

Signature
Print Name
Position
Organization
Address
Date
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