



APPLICATION FOR ADMISSION

into the Makor College Experience at Yeshiva University

Thank you for your interest in the Makor College Experience, a joint program of Makor Disability Services and Yeshiva University.

We are excited to review your application.

Please remember that admissions to the program are competitive, and not everyone who applies will be accepted into the program.

Do your best to complete the application by yourself; if you need help filling out the application, please make sure the answers are still your own.

In addition to the completed application, we will also need:

- A copy of your high school transcript if you have one
- Your most recent Individualized Education Plan (IEP)
- Your most recent psychological evaluation
- The contact information of 2 (two) individuals who are familiar with your abilities and who can serve as references for you
- An MCE Skills Assessment Form, completed by a parent or guardian

Upon receiving the application, our staff will review your documentation and contact your references. If we feel you are appropriate for the program, we will then call you to schedule an admissions interview. After the interview, you will receive a letter letting you know if we were able to accept you into the program.

Please provide all supporting documentation and submit the application to:

THE MAKOR COLLEGE EXPERIENCE
Admissions Office
1556 38th Street
Brooklyn, New York 11218

Try to be as honest and independent as you can when you complete the application.

We look forward to hearing from you!

SECTION ONE: STUDENT INFORMATION Anticipated year of enrollment (All students start in the fall) Date of birth _____ Name ___ Address _____ Cell phone number Home phone number _____ Email address Social Security number ____ Medicaid number _____ SECTION TWO: PARENT/GUARDIAN INFORMATION Name Home phone number _____ Cell phone number _____ Email address Home phone number _____ _____ Cell phone number _____ Email address Occupation ____ SECTION THREE: SCHOOL AND WORK INFORMATION Name of high school ______Year of graduation ______ Address of high school _____ What type of services did you receive in high school? Self-Contained Classes Resource Room Consultant Teacher Counseling Inclusion Classes Speech Therapy ____ Occupational Therapy (OT) ____ Physical Therapy (PT) ____ Other ____ What was your favorite subject? What was your least favorite subject? _____ What areas are you interested in learning more about? ______ What activities were you involved with in and out of school? If you have attended any school or program after high school, please fill out information below. Name of school/program ______ Dates: From _____ To _____ _____State _____

Did you ever have a job? If so, where?

What were your responsibilities?

Name of school/program _______ Dates: From _____ To _____

City ______ State ______

Did you ever have a job? If so, where?

What were your responsibilities? ____

SECTION FOUR: REFERENCES

Please provide the name of 2 (two) people not related to you that we can contact to provide references for your admission into the Makor College Experience.	
Name	
	Relationship
Name	
Phone number	Relationship
SECTION FIVE: ESSAY	
In one or two paragraphs, answer the following question:	
Why do you want to attend the Makor College Experience at Yeshiva University?	