Instructions for Completing Application for Admission

1. Students apply either to the Rabbi Joseph B. Soloveitchik Semikha Program, the Pre-Semikha Program, or the Ludwig Jesselson Kollel Chaverim (Chaver Program) Program. While it is envisioned that most of the students will have attended Yeshiva College, graduates from other college institutions may apply as well, in accordance with the requirements set forth below.

   a. Requirements for admission to the Rabbi Joseph B. Soloveitchik Semikha Program include:
      i. A Bachelor’s degree from an accredited college or university.
         Students with senior status at Yeshiva College or the Sy Syms School of Business may be considered for acceptance to the Semikha program during their senior year of college on an individual basis, based on their length of study in Israel.
      ii. A satisfactory record in Talmud and Jewish Studies beyond the secondary school level for at least four years. Successful completion of any of the Yeshiva College Undergraduate Torah Studies Programs will automatically count towards fulfillment of this requirement.
      iii. An entrance examination (bechina) demonstrating proficiency in Talmud.
      iv. A personal interview.

   b. Requirements for admission to the Pre-Semikha Program (for those not yet ready to be accepted to the Semikha program) include:
      i. A Bachelor’s degree from an accredited college or university.
      ii. An entrance examination (bechina).
      iii. A personal interview.

   c. Applicants to the Ludwig Jesselson Kollel Chaverim (Chaver Program) are evaluated on an individual basis. They require:
      i. A Bachelor’s degree from an accredited college or university.
      ii. An entrance examination (bechina).
      iii. A personal interview.

2. Please submit the following items to the RIETS Office:
   a. A completed application form.
   b. A $50 non-refundable application fee made payable to RIETS.
   c. Two recent passport-sized photos.
   d. One official copy of your transcript from each undergraduate and graduate institution attended. Student copies of the transcript are acceptable for Yeshiva University schools.
   e. Two letters of recommendation, one from the student’s most recent rebbe and one from the congregational rabbi.

3. Ordination by the Rabbi Isaac Elchanan Theological Seminary is contingent upon the successful completion of one of the following co-requisite programs. Applications for the Masters programs are available from the individual schools or from the YU website (http://yu.edu/academics/graduate-schools/)
   a. Master of Science, Azrieli Graduate School of Jewish Education and Administration.
   b. Master of Arts, Bernard Revel Graduate School.
   d. Machshevet Yisrael Program, RIETS.
   e. Intensive Kollel Program, RIETS (including the Marcos and Adina Katz Kollel at the Wilf Campus and the Kollel at the Caroline and Joseph S. Gruss Institute in Jerusalem) Kollel Applications are available at www.riets.edu.

4. For more information about RIETS programs or the RIETS curriculum, please visit www.riets.edu or contact the RIETS office: riets@yu.edu or (646) 592-4455.
RABBI ISAAC ELCHANAN THEOLOGICAL SEMINARY
an affiliate of Yeshiva University
500 West 185 Street, Glueck Suite 632 • New York, NY 10033
(646) 592-4455 • Fax: (646) 592-4060 • riets@yu.edu • www.riets.edu
Application for Admission to Rabbi Isaac Elchanan Theological Seminary

☐ Rabbi Joseph B. Soloveitchik Semikha Program  ☐ Pre-Semikha Program  ☐ Ludwig Jesselson Kollel Chaverim (Chaver Program)
Beginning Term:  Fall 20___  Spring 20___

1. Name: Mr. ____________________________________________  2. YU ID (if available): __________________________
   Last                                      First                                      Middle


5a. Current Mailing Address: ____________________________________________
    Number and Street,                                 City          State          Zip Code

5b. Permanent Address: _________________________________________________
    Number and Street,                                 City          State          Zip Code

6a. Cell Phone: __________________  6b. Home Phone: ______________________  6c. Email: __________________________

7a. Date of Birth (mm/dd/yyyy): _____/_____/_______  7b. Place of Birth: _________________________________


8a. Shul at Home:  __________________________________

8b. How long have you been in the U.S.? __________________

8c. Rabbi:  _______________________________________

9a. Occupation: ____________________________________________

9b. Employer: ___________________________________________

9c. Business Address: _______________________________________

9d. Business Phone: _______________________________________

10a. Marital Status: ___________________________________________

10b. Wife’s Maiden Name: _____________________________________

10c. Children’s names and ages: ____________________________

10d. Wife’s Hebrew Name: ________________________________

10e. Father’s English Name: ________________________________

10f. Shul that in-laws attend: __________________________________
    City: ____________________________________________

11. Father’s English Name: ____________________________________________
    Hebrew Name: ____________________________
    □ Kohen □ Levi □ Yisrael

Father’s Employer: __________________________________________
Business Address: _________________________________________
Business Phone: __________________________________________

Mother’s English Name: _______________________________________
Hebrew Name: ____________________________
Hebrew Name: ____________________________

Maiden Name: ____________________________________________
Mother’s Employer: _______________________________________
Business Address: _________________________________________
Business Phone: __________________________________________

12. Secondary Education (List all high schools):

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<tr>
<th>Name of School</th>
<th>Location (City and State or Country)</th>
<th>Dates of Attendance</th>
<th>Year of Graduation</th>
<th>GPA</th>
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13. Other yeshivot attended (including YU and those attended as part of the YU S. Daniel Abraham Israel Program):

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<thead>
<tr>
<th>Name of Yeshiva</th>
<th>Dates of Attendance</th>
<th>Rebbe and Tractates(s) Studied</th>
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Attach a recent photograph of yourself here.
14. Colleges or Universities (list all undergraduate and graduate schools):

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<th>Name of School</th>
<th>Location (City and State or Country)</th>
<th>Dates of Attendance</th>
<th>Year of Graduation</th>
<th>Major</th>
<th>GPA</th>
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15. Have you ever applied to or attended a school of Yeshiva University?  
☐ Yes  ☐ No

16. Family members who have attended Yeshiva University schools, including RIETS.

Name: ___________________________ School attended: _____________ Relation: _____________

Name: ___________________________ School attended: _____________ Relation: _____________

Name: ___________________________ School attended: _____________ Relation: _____________

Name: ___________________________ School attended: _____________ Relation: _____________

17. If you attended Yeshiva College and/or the Sy Syms School of Business, please provide the following information:

☐ Attended JSS and/or Mechinah Program from __________ to __________

☐ Attended IBC from ________ to ________  Major: _____________ Minor: _____________

☐ Attended SBMP from ________ to ________

☐ Attended MYP from ________ to ________

18. If you are enrolled in a YU joint Bachelor’s/Master’s Program, please indicate the subject area and expected date of completion: ____________________________________________

19. If you are applying to the Rabbi Joseph B. Soloveitchik Semikha Program, please indicate the co-requisite program in which you intend to enroll: Masters Degree: ☐ Azrieli Graduate School of Jewish Education & Administration; ☐ Bernard Revel Graduate School of Judaic Studies; ☐ Wurzweiler School of Social Work;

Or: ☐ Katz Kollel; ☐ Machshevet Yisrael Program; ☐ Other: _________________________________

20. If you are applying to the Ludwig Jesselson Kollel Chaverim (Chaver Program), please indicate your intended area of graduate or professional studies. If none, please explain: ____________________________________________

21. Please provide the name, address, and phone number of the two people who will be submitting letters of recommendation on your behalf.

Name: ___________________________ Address: ___________________________ Phone: _____________

Name: ___________________________ Address: ___________________________ Phone: _____________

22. Please give a brief statement indicating your reasons for applying to Rabbi Isaac Elchanan Theological Seminary, explaining your career intentions and any other pertinent factors.

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________
Please ensure that all application materials have been submitted. Bechicot and interviews will be scheduled only after all materials are received.

- Application for Admission
- $50 application fee payable to RIETS
- Two recent passport-sized photos
- Official copy of transcript(s)
- Two letters of recommendation
- Foreign Student Questionnaire
- Test of English as a Foreign Language (TOEFL)
Request for Letter of Recommendation

To Applicant: Please complete the top half of this form and give it to the Rabbi whose recommendation you are seeking with a stamped envelope addressed to the RIETS Office at the above address. Applicants must submit two letters of recommendation: one from the student’s most recent rebbe and one from his congregational rabbi.

☐ Rabbi Joseph B. Soloveitchik Semikha Program  ☐ Pre-Semikha Program  ☐ Ludwig Jesselson Kollel Chaverim (Chaver Program)

Beginning Term: Fall 20___  Spring 20___

Name: __________________________________________
Address: ________________________________________

Dear Rabbi,

The above-named student is applying for admission to the Rabbi Isaac Elchanan Theological Seminary. We would appreciate your sending us your recommendation for this applicant, indicating how long you have known him and whether or not you consider him a proper candidate for admission. We are interested in his Torah scholarship, his intellectual abilities, his ethical and moral character, and his commitment to Torah ideals and the observance of mitzvot. This recommendation will be kept in absolute confidence.

Please write your recommendation in the space below. If more space is needed, please attach another sheet.

Name (print): ____________________________  Title: ________________________________
Signature: ______________________________  Institution: ___________________________
Date: _______________________________
RABBI ISAAC ELCHANAN THEOLOGICAL SEMINARY
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Beginning Term: Fall 20___ Spring 20___

Name: ____________________________________________
Address: ____________________________________________
________________________________________

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Please write your recommendation in the space below. If more space is needed, please attach another sheet.

Name (print): ____________________________________________
Title: ____________________________________________
Signature: ____________________________________________
Institution: ____________________________________________
Date: ____________________________________________
Foreign Student Questionnaire

All applicants who are not U.S. citizens must complete this form and return it with the application for admission.

Check all that currently apply:

Yeshiva College
Isaac Breuer College
Rabbi Isaac Elchanan Theological Seminary Wurzweiler
School of Social Work
Sy Syms School of Business
Stone Bais Medrash Program
Azrieli Graduate School
Ferkauf Graduate School of Psychology
Mazer Yeshiva Program
Mechinah Program
Bernard Revel Graduate School
Cardozo School of Law

Program (Major): ______________________________
Program Began: _______________________
Degree sought: ______________________________
Expected Date of Graduation: __________________

Name: Mr. __________________________________________
Social Security Number: ___-__-____

Current Mailing Address:

Number and Street, City State Zip Code

Permanent (Home) Address:

Number and Street, City State Zip Code

Cell Phone: ___________ Home Phone: ___________ Email: ___________

Date of Birth (mm/dd/yyyy): ______/_____/_______
Place of Birth: ________________________________

Person to contact locally in case of emergency: __________________________________________

Name ____________________________ Phone ___________

Number and Street, City State Zip Code Email ___________

Country of Citizenship: __________________ Passport #: __________________ expires: ___________

In the United States now. Which visa do you hold? ________________________________
Planning to come to United States under category other than student. Which visa will you hold? ________________

English is my native language.

English is not my native language. Date of Test of English as a Foreign Language (TOEFL):
I have arranged for my TOEFL scores to be sent to Yeshiva University
Please do so immediately if you have not done so already.

If enrolled in a full-time course of English language study: Where? ___________ Date of completion: ________

If you have previously attended any American schools, please complete the following:

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<th>School</th>
<th>Address</th>
<th>Dates of Attendance</th>
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