



The William Davidson Graduate School of Jewish Education

The Jewish Theological Seminary
www.jtsa.edu
3080 Broadway ♦New York, NY 10027-4649

Application for Admission (Non- Matriculated Only)

GENERAL INFORMATION

Date _____ Sex: Male ____ Female ____ Social Security No. _____

1. Print Legal Name

Last

First

Middle

First Name you use: _____

2. Maiden name, birth name or other names you have used on academic records _____

3. To enter: Fall Semester 20____ Spring Semester 20____ Summer Session 20 ____

4. Present mailing address

Until: (____/____/____) _____

No. and Street

City

State

Zip

Cell phone (include area code) _____

Email address _____

Home Phone (include area code) _____

6. Permanent address

No. and Street

City

State

Zip

Telephone (include area code) Work _____

Home _____

7. Date of Birth _____ Place of Birth _____

8. Citizenship _____

9. Native language, if other than English _____

10.a. Are you currently enrolled in a college or university? Yes ____ No ____

10. b. If so, list institution _____

10.c. Major _____ Anticipated degree _____ Date _____

EDUCATION IN GENERAL STUDIES

11. a. College _____

b. Other _____

EDUCATION IN JEWISH STUDIES

12. a. College Name _____ Date _____

b. Secondary Level Name _____ Date _____

c. Elementary School Name _____ Date _____

d. Summer Camps Name _____ Date _____

e. Other Name _____ Date _____

PERSONAL STATEMENT

13. Please submit a short paragraph outlining your reason(s) for wishing to study in the Davidson Graduate School of Jewish Education.

14. Please submit your undergraduate as well as graduate transcripts (if applicable) to the address below. You must have a bachelor's degree to enroll in a graduate course at JTS.

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Date _____ Signature of Applicant _____