



A meaningful Jewish education  
that lasts a lifetime.

**MENACHEM MENDEL SEATTLE CHEDER**  
 MONTESSORI EARLY CHILDHOOD • ELEMENTARY SCHOOL • GIRLS’ HIGH SCHOOL  
 “A meaningful Jewish education that lasts a lifetime”  
 8511 15<sup>th</sup> Avenue NE • Seattle, WA 98115  
 Phone: 206-523-9766 • Fax: 206-524-6105 • info@mmscdayschool.org • MMSCDaySchool.org

**APPLICATION FOR ADMISSION**

**STUDENT INFORMATION**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Hebrew Name \_\_\_\_\_

Male [ ] Female [ ] Age \_\_\_\_\_ Birth Date \_\_\_\_\_ 2013-2014 Grade Level \_\_\_\_\_

Is the applicant adopted? Yes  No

Were both parents born into the Jewish Faith? Yes  No  If no, please explain \_\_\_\_\_

Were all grandparents born into the Jewish Faith? Yes  No  If no, please explain \_\_\_\_\_

List names and dates of schools attended from preschool to present including Talmud Torah/Hebrew school attendance

SCHOOL NAME	LOCATION/TELEPHONE	DATES OF ATTENDANCE

Has student ever been dismissed from any school? Yes  No  If yes, explain \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

Parent/Guardian \_\_\_\_\_  
Last Name First Name

Occupation \_\_\_\_\_

Cell \_\_\_\_\_ Email \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Synagogue Affiliation \_\_\_\_\_

Parent/Guardian \_\_\_\_\_  
Last Name First Name

Occupation \_\_\_\_\_

Cell \_\_\_\_\_ Email \_\_\_\_\_

Check if same

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

Synagogue Affiliation \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**An application fee of \$75 per applicant is required with this form. Please make check payable to MMSC.**