

Women's Institute of Torah Seminary  
MAALOT Baltimore



*Application for  
Admission*

תשע"ט • 2018-2019

*Rebbetzin Ettie Rosenbaum*  
Menahel/Executive Dean

*Dr. Leslie G. Klein*  
Academic Dean

*Mrs. Judy Gross*  
Dean Emerita

**ENDORSED BY**

*Horav Moshe Heinemann, שליט"א*

*Horav Yaakov Hopfer, שליט"א*

6602 Park Heights Avenue • Baltimore, Maryland 21215

T 410-358-3144 • F 866-990-1983

info@wits.edu • <http://wits.edu>

# Women's Institute of Torah Seminary/MAALOT Baltimore || APPLICATION FOR ADMISSION

I AM APPLYING TO THE  ISRAEL STUDY ABROAD PROGRAM 1. complete entire application  2<sup>ND</sup> YEAR SEMINARY PROGRAM 1. complete pages 1 thru 5 2. complete two reference forms  POST-SEM PROGRAM 1. complete pages 1 thru 5 2. list two references on page 5

Legal Last Name

If different than above:  Married Name  Maiden Name

Legal First and Middle Name

Preferred Name

Hebrew Name (print in Hebrew)

Social Security Number

Date of Birth (mm/dd/yyyy)

Place of Birth

Home Address

City/State/Zip

County:  Baltimore City  Baltimore County  Other:

Country

Citizenship:  United States  Other:

Residency:  Maryland  Other:

Home Telephone Number

Email

Cell Information Texting?  Yes  No

Cell Number:

Father Name and Title

Occupation \_\_\_\_\_

Company \_\_\_\_\_

Business Phone \_\_\_\_\_

Father Cell \_\_\_\_\_

Father Email \_\_\_\_\_

Mother Full Name, Maiden Name and Title

Occupation \_\_\_\_\_

Company \_\_\_\_\_

Business Phone \_\_\_\_\_

Mother Cell \_\_\_\_\_

Mother Email \_\_\_\_\_

Parents' Marital Status:

Married  Widowed  Divorced

In Which Shul Does Your Family Daven?

Name of Family Rav AND Telephone Number

Nusach:

Ashkenaz  Sfard  Sfardi - Aidut Hamizrach  Ari

List Standardized Tests Taken:

<input type="checkbox"/> ACT	<input type="checkbox"/> SAT
Composite Score:	Math Score:
English Score:	Reading/Writing Score:
Math Score:	
Reading Score:	
Science Score:	Date ACT taken:
Writing Score:	Date SAT taken:

**Women's Institute of Torah Seminary/MAALOT Baltimore || APPLICATION FOR ADMISSION**

List all high schools and colleges attended.  
Include college programs taken in high school.

High School/College	
Address	
City/State/Zip	
Telephone	
Years Attended	
HS College Programs	

High School/College	
Address	
City/State/Zip	
Telephone	
Years Attended	
HS College Programs	

High School/College	
Address	
City/State/Zip	
Telephone	
Years Attended	
HS College Programs	

Are you degree seeking at WITS/MAALOT?  Yes  No

Student must submit with application an official high school transcript showing the date of graduation - to be emailed or mailed from the institution.

Describe your level of fluency in written and spoken Hebrew.

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What are your special talents or interests?

--

List your summer activities for the past 4 years.

20__:
20__:
20__:
20__:

List organizations you have participated in during the past 4 years.

20__:
20__:
20__:
20__:

List names, ages and current schools\* of siblings.

Name	Age	School Attending <small>*If married, where they live.</small>

**IF YOU ARE RETURNING FROM SEMINARY LIST:**

Seminary Attended	
Address	
Telephone Number	
Dates Attended (mm/yyyy)	____ / _____ to ____ / _____

Did you secure your seminary credits through an Israel option program?  Yes  No

If yes, which program?

- MAALOT/Gratz  Hebrew Theological College (TI)
- NEVE/NCCRS  Touro  Stern  CCAP  ECE
- Other \_\_\_\_\_

**GENERAL MEDICAL INFORMATION**

**Have you ever sustained any serious injury or suffered from a chronic illness?**

<input type="checkbox"/> No
<input type="checkbox"/> Yes. Please explain.

**Are you presently receiving any medical treatment or taking any medications?**

<input type="checkbox"/> No
<input type="checkbox"/> Yes. Please explain.

**Have you ever been seen by a mental health professional?**

<input type="checkbox"/> No
<input type="checkbox"/> Yes. Please explain.

**Have you ever been treated for an eating disorder?**

<input type="checkbox"/> No
<input type="checkbox"/> Yes. Please explain.

**Emergency contact in the Baltimore area (other than parent).**

Name:	Relationship:
Address/Zip:	Cell Number:

**Applicant First and Last Name - Printed**

**Applicant Signature**

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**OUTSIDE FUNDING**

Students who will receive any type of outside resource (such as a scholarship, grant or employer tuition reimbursement) that will assist them in paying for their educational related expenses (such as tuition, Mevoros books, textbooks/supplies, travel and personal expenses) must report this information annually to WITS/MAALOT. This may also include other sources of funding (such as financial assistance from a private organization or business) not affiliated with WITS/MAALOT. Please indicate if you will be receiving any outside resources.  Yes  No

Name of Outside Resource	Amount Per Year
1.	\$
2.	\$

**WITS/MAALOT is required to ask applicants questions in the following 2 sections.**

**1. CONDUCT SECTION**

WITS/MAALOT recognizes that an educational environment characterized by safety, respect and integrity enhances learning for all students. All applicants are required to respond fully to the questions below pertaining to conduct.

**Have you ever been disciplined, e.g., placed on probation, suspended or expelled by any secondary school, college or university you have attended because of academic dishonesty, research misconduct, financial impropriety or an offense that harmed, or had the potential to harm, others?**

<input type="checkbox"/> No
<input type="checkbox"/> Yes. Please explain.

**Have you ever pleaded guilty or no contest, participated in a pre-sentencing diversion program and/or been convicted of a criminal offense (including juvenile court), or are there criminal charges pending against you at this time?**

<input type="checkbox"/> No
<input type="checkbox"/> Yes. Please explain.

**2. DEMOGRAPHIC AND ETHNICITY SECTION**

Questions in the demographic and ethnicity section of the application are for statistical and required reporting purposes only. This information is not used to make admissions decisions.

**ETHNICITY:** Are you Hispanic or Latino?  Yes  No

**ETHNICITY:** Select One or More of the Following Races

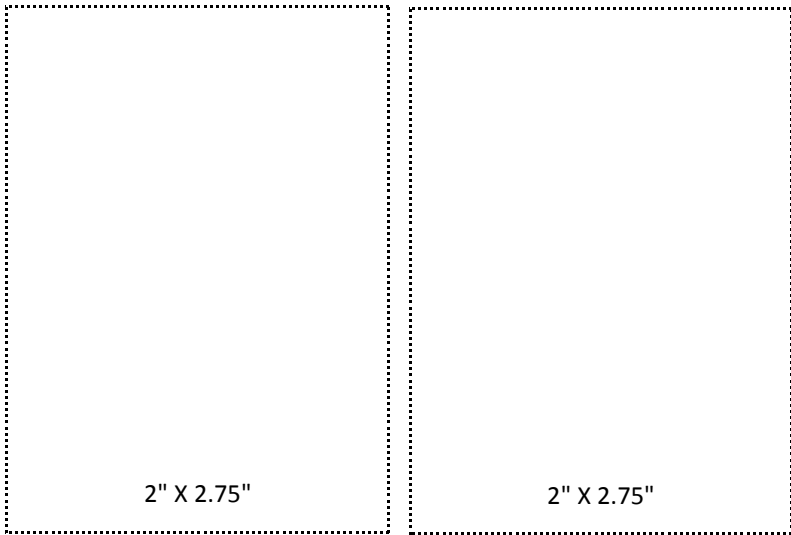
- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Two or More Races
- Hispanics of Any Race
- Race and Ethnicity Unknown

**US Armed Service Veteran?**  Yes  No

**INTERVIEW INFORMATION**

At the discretion of the Menacheles/Executive Dean or Academic Dean, an applicant may be asked to come in for an interview and take a skills test. (Based on test results, a student may be required to take a skills enhancement course as a pre-requisite for Kodesh classes. College credit will be given for this course.)

**TAPE TWO PASSPORT SIZE PHOTOGRAPHS HERE**



**SIGNATURES REQUIRED**

I hereby submit my application to Women's Institute of Torah Seminary/MAALOT Baltimore and certify that all information submitted with this application is complete and accurate to the best of my knowledge.

I understand and agree that the application fee is non-refundable.

Signature of Applicant	Date

Signature of Parent or Guardian	Date

**MAIL APPLICATION, DEPOSIT AND FORMS TO**

WITS/MAALOT Admissions  
 6602 Park Heights Avenue  
 Baltimore, Maryland 21215

**REFERENCES**

**POST-SEM Applicants ONLY:  
 list two references below**

REFERENCE #1	NAME:
TITLE/POSITION	
EMAIL	
TELEPHONE	
CELL	

REFERENCE #2	NAME:
TITLE/POSITION	
EMAIL	
TELEPHONE	
CELL	

**APPLICATION CHECKLIST**

**EARLY ACTION DEADLINE: JULY 9.**

- Non-Refundable Application Fee by July 9: \$150
- Non-Refundable Application Fee after July 9: \$175

**I AM APPLYING TO WITS/MAALOT**

- ISAP/SEM PROGRAM
- SEM PROGRAM
- POST-SEM PROGRAM

**INCLUDE**

- Completed Application (Pages 1, 2, 3, 4, 5)
- Two** Passport Size Photographs
- Completed ISAP Form (ISAP Applicants ONLY)
- Essay (ISAP Applicants ONLY)
- Two** Reference Forms (ISAP/SEM and SEM)
- Official High School Transcript
- Official Seminary Transcript (if applicable)
- Official College Transcript(s) [if applicable]
- Submit Official ACT or SAT Score Reports  
 (WITS/MAALOT ACT code: 7796)  
 (WITS/MAALOT SAT code: 5491)

Women's Institute of Torah Seminary/MAALOT Baltimore is accredited by The Association of Institutions of Jewish Studies and is approved by the Maryland Higher Education Commission as a degree granting institution of higher learning.

# שנת לימוד בישראל

# Israel Study Abroad Program

ISAP is for students continuing their studies at WITS/MAALOT after Seminary in Israel.

Legal Last Name

Legal First and Middle Name

Date of Birth (mm/dd/yyyy)

## SEMINARY ATTENDING

Name:

Address:

Office Telephone:

Email:

## ESSAY

Write an essay (approximately 150 words) describing your religious and academic goals.  
Please attach your essay to this form.

## TUITION

Israel Study Abroad Program Tuition..... \$1,250  
(ISAP tuition paid directly to Gratz College upon receipt of acceptance letter from WITS/MAALOT.)

**NON-REFUNDABLE DEPOSIT REQUIRED UPON ACCEPTANCE..... \$500**  
(Deposit applied towards 2019-2020 WITS/MAALOT tuition.)

I hereby submit my application for the Israel Study Abroad Program. I understand that my participation in ISAP is contingent upon my acceptance to WITS/MAALOT. I understand that the application fee and deposit are non-refundable.

Signature of Applicant:

Date:

Signature of Parent or Guardian:

Date:



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410-358-3144 (t) 866-990-1983 (f) info@wits.edu

## Applicant Reference Form

### To the Applicant:

Fill in your name and address. You must submit two completed Reference Forms - at least one recommender from your current seminary. The second recommender should be from a principal or teacher. The Reference Forms should be sealed and mailed to the WITS/MAALOT office or included with your application.

### To the Reference:

The Admissions Committee finds candid evaluation helpful in choosing qualified students for our seminary.

### Confidentiality:

Individuals given access to the materials are instructed to maintain strict confidentiality.

Applicant's Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Reference's Name \_\_\_\_\_

Title \_\_\_\_\_

Institution \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Capacity in which you have known applicant \_\_\_\_\_

Number of Years \_\_\_\_\_

	Excellent	Very Good	Good	Average	Below Average
Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Textual Skills:</b> <b>Ability to Read &amp; Understand</b> <b>מפרשים</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care in שמירת המצוות	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contributes to Class Discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Depth of Intellectual Interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disciplined Work Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Modesty in Attire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Outgoingness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to Difficulty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect Accorded to Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respect Accorded to Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School Contribution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sensitivity to Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warmth of Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### WITS/MAALOT Office Use Only

Comments: \_\_\_\_\_





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**Applicant's Name** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City/State/Zip** \_\_\_\_\_  
  
**Reference's Name** \_\_\_\_\_  
**Title** \_\_\_\_\_  
**Institution** \_\_\_\_\_  
**Address** \_\_\_\_\_  
**City/State/Zip** \_\_\_\_\_  
**Telephone** \_\_\_\_\_ **Email** \_\_\_\_\_  
**Capacity in which you have known applicant** \_\_\_\_\_  
**Number of Years** \_\_\_\_\_

	Excellent	Very Good	Good	Average	Below Average	<b><u>WITS/MAALOT</u></b> <b><u>Office Use Only</u></b> _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____ _____
Academic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Academic Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
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<b>Textual Skills:</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<b>Ability to Read &amp; Understand</b>						
<b>מפרשים</b>						
Care in שמירת המצוות	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Character	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Contributes to Class Discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Critical Thinking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Depth of Intellectual Interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Disciplined Work Habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Flexibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Modesty in Attire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Outgoingness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Personal Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Reaction to Difficulty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Respect Accorded to Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Respect Accorded to Peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
School Contribution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Self Confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sensitivity to Others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Warmth of Personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**Comments:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_