

2017-18

Application for Admission Package



Mazel
Day School
ACADEMY OF THE ARTS AND SCIENCES



About the Admissions Process

Admission to our School is selective; the aim is to enroll a diversity of talented, well-adjusted and academically capable students who will make a positive contribution to the school community and who will find personal success at the school. Admission decisions are made after careful evaluation of each student's application materials, interview, referrals and availability of space.

The first step in the admissions process begins with a submission of an application form, followed by a visit tour by prospective students and parents, as well as an interview and assessment of applying students by our Educational Director. This will give you the opportunity to see what we can provide your child, as well as if your child is a good candidate for our program. If your child is currently on a waiting list for any of our classes, the process of the admission schedule below still applies.

Tuition assistance is available to qualifying families of students applying to Pre-K through Grade 8. The amount of aid awarded each year is based on documented need (including tax returns). All information submitted is kept strictly confidential. When completing the application for admission, check the appropriate box to indicate that you are requesting tuition assistance information. The School Office will forward all the necessary forms to you with detailed instructions and deadlines.

ADMISSION CHECKLIST:

The following items should be submitted by **JANUARY 31ST** (PRESCHOOL applicants) or **FEBRUARY 15TH** (GRADES K-8 applicants). *Late applications will be considered on a space available basis.;*

- Completed Application Form
- Recent Photograph of Applicant
- Application Fee of \$200

For New Students applying to Grades PreK and up... (in addition to all items listed above)

- Teacher's Reference letter - See pages 8-10

For New Students applying to Grades 1 and up... (in addition to all items listed above)

- Signed Transcript/Records Release Form - See page 7
- Current semester report card, as well as Report Cards of two prior school years
- Results of most recent Standardized Tests
- IEP or other relevant Educational Evaluations / Reports
- Samples of recent student work or writing

Following the receipt of all documentation, new Student visits to the school will be scheduled. Visits include an on-site tour with parents, a student interview and screening (informal or formal, depending on age of child). The Director of Admissions will contact you to schedule an appointment for your tour.



APPLICATION FOR ADMISSION

2017-2018 SCHOOL YEAR

NEW APPLICANTS

Student Information

Last Name: Male Female

First Name: Nickname:

Hebrew Name (if known): Country of Birth:

Date of Birth: / / Hebrew Birth date (if known):

Address:

City: State: Zip code:

Living With: Parents Mother Father Other:

Is father Jewish? Is mother Jewish? Is maternal grandmother (mother's mother) Jewish?

Were there any conversions in the family? If yes, who?

What was the name of the Rabbi who officiated the conversion?

Language(s) spoken at home: Child's first language:

Please attach a recent photo of the applicant to the application.

Program Application {Tuition rates on page 6}

PRESCHOOL DIVISION

- PRE-NURSERY** (DOB 12/2014 – 10/2015, child must be turning 2 by Oct) Full Day
- NURSERY** (DOB 12/2013 – 11/2014, child must be turning 3 by Nov) Half Day *(available only for Pre-Nursery)*
- PRE-K** (DOB 12/2012 – 11/2013, child must be turning 4 by Nov)

LOWER SCHOOL DIVISION

- KINDERGARTEN** (DOB 12/2011 – 11/2012, child must be turning 5 by Nov)
- GRADE 1** (DOB 12/2010 – 11/2011)
- GRADE 2** (DOB 12/2009 – 11/2010)
- GRADE 3** (DOB 12/2008 – 11/2009)
- GRADE 4** (DOB 12/2007 – 11/2008)

MIDDLE SCHOOL DIVISION

- GRADE 5** (DOB 12/2006 – 11/2007)
- GRADE 6** (DOB 12/2005 – 11/2006)
- GRADE 7** (DOB 12/2004 – 11/2005)
- GRADE 8** (DOB 12/2003 – 11/2004)
- Transportation Busing (NYC Dept of Ed)



Mazel Day School
 2901-15 Brighton 6th Street
 60 West End Avenue
 Brooklyn, NY 11235
 Phone: 718-368-4490
 Email: admissions@mazeldayschool.com

Parent Information

FATHER'S INFORMATION

Father's Last Name: Dr. Mr. Rabbi

Father's First Name: Hebrew Name (if known):

Home Address (if different from child's):

Occupation:

Business Name:

Business Address:

City: State: Zip code:

Home Phone: Cell:

E-Mail:

Special Interests/Hobbies:

MOTHER'S INFORMATION

Mother's Last Name: Dr. Mrs. Ms.

Mother's First Name: Hebrew Name (if known):

Home Address (if different from child's):

Occupation:

Business Name:

Business Address:

City: State: Zip code:

Home Phone: Cell:

E-Mail:

Special Interests/Hobbies:

*Please note that the school often uses email as its primary means of communication.
 Please provide us with the email address that you check most frequently.*

Preferred number to use when contacting Parents: Home Mom's Cell Dad's Cell Other

Is one parent currently living out of state? Yes No If yes, who?

Are parents separated or divorced? Yes No If yes, who has legal custody?

If yes, to whom should tuition and financial correspondence be sent?



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Sibling Information

Number of Siblings in Child's family: _____ Placement of Child in Family (youngest, oldest, etc.): _____

Sibling Name _____ Age _____ School Attending _____ Current Grade _____

Does the Child have a sibling enrolled at Mazel Day School currently or in the past?

Name of Sibling who is a current / past Mazel Day School student? _____

Previous School Experience

Child's Current School/Program: _____

School Address: _____

Phone Number: _____ Name of Principal: _____

Please list all schools previously attended including Day Care/Preschool:

Name of School _____ City _____ Grade/Age _____ Phone Number _____

Please list all summer camps/programs previously attended:

Name of Summer Camp _____ City _____ Dates Attended _____ Phone Number _____

Has your child ever been asked to withdraw from a school or camp program? Yes No

If yes, please explain: _____

Has your child ever repeated or skipped a grade? Yes, Repeated Yes, Skipped No

If yes, what grade level was repeated or skipped? _____

Interest in Application

How did you hear about our school?

Friend – Name: _____

Radio

Internet Search

Relative – Name: _____

Facebook Group

Newspaper



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Please indicate why you are interested in applying for admission to Mazel Day School. Explain why you feel your child may be a good candidate for our program:

Special Needs

Is there any medical information that is important for the school to be aware of? Yes No
If yes, please explain:

Is there any special family circumstance (move, divorce, illness, loss)? Yes No
If yes, please explain:

Are there any academic or learning accommodations that your child may need? Yes No
If yes, please explain:

Please list any form of professional therapy or counseling services which your child may have received.
[This information is confidential and will not be shared with any other individuals or organizations without your knowledge. Please understand that this information is essential to our overall understanding of your child so that we will be able to provide him/her with the most meaningful & quality education possible.]

Type of Therapy: *Please circle: Service Current or Terminated*

Reason for Service:

Type of Therapy: *Please circle: Service Current or Terminated*

Reason for Service:

More About You & Your Child...

Please briefly describe your child's personality, interests and abilities:

As parents, what are your educational expectations of Mazel Day School?



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What interests you in having your child attend a private Jewish day school?

How would you describe your child's present school experience?

We strongly encourage parental involvement at our school. In what ways might you be able to share your time, resources or talents with our school?

Parent Signature

Tuition assistance is available to qualifying families of students applying to Pre-K through Grade 8.

Do you wish to receive information about the Tuition Assistance program? Yes No

If Yes, Tuition Assistance application information will be sent to you. Please attend to these materials in a timely fashion. We may not be able to honor late application.

To the best of my knowledge, the information I have provided in this application is true and complete. I understand that omission of (or inaccurate) information may be grounds for dismissal if student has been accepted.

Signature of Parent/Guardian

Date

Please return the completed application form, including application fee of \$200 made payable to Mazel Day School – F.R.E.E. by **JANUARY 31ST** (PRESCHOOL applicants); **FEBRUARY 15TH** (GRADES K-8 applicants) to:

Mazel Day School
ATT: ADMISSIONS
2901 Brighton 6th Street
Brooklyn, NY 11235
admissions@mazeldayschool.com

FOR OFFICE USE ONLY

- \$200 Application Fee PAID _____ CASH _____ CHECK # _____ Date Submitted: _____
- For New Students (PreK – Grade 8): Teacher Recommendation Date Received: _____
- For New Students (Grades 1 – 8): Transcripts and Records Date Received: _____



2017-2018 Tuition Rates

Note: Tuition is subject to an annual increase.

PRESCHOOL DIVISION

	HOURS	SEPTEMBER TO JUNE
Application for Admission Fee <i>Payable upon submission of this form</i>		\$200
Parent Association Fee (includes fees for trips and special programs throughout school year)		\$150
Facilities Fee (for expenses related to maintenance and repairs of classrooms and play spaces)		\$125
Security Fee (for expenses related to providing security to the school site)		\$200
Full Day Program	9 am – 4 pm	\$11,250 (\$1125 a month)
Half Day Program <i>Available for Pre-Nursery only</i>	9 am – 12:45 pm	\$10,900 (\$1090 a month)
Part Extended Day Program	9 am – 4 pm + 1 extended care hour	\$12,000 (\$1200 a month)
Full Extended Day Program	8 am – 6 pm	\$12,350 (\$1235 a month)

LOWER SCHOOL (K-4) DIVISION

	HOURS	SEPTEMBER TO JUNE
Application for Admission Fee <i>Payable upon submission of this form</i>		\$200
Book and Supplies Fee		Kindergarten: \$135; Grades 1-4: \$190
Parent Association Fee (includes fees for trips and special programs throughout school year)		\$175
Facilities Fee (for expenses related to maintenance of children's classrooms and play spaces)		\$135
Security Fee (for expenses related to providing security to the school site)		\$250
Regular Tuition	8:40 am – 4:15 pm	\$14,200
Early Drop Off	8 am – 8:40 am	Additional \$750
After School / Homework Help	<i>Provided by third-party vendor</i>	
Transportation <i>FREE Busing available from Dept. of Education, though it's NOT door-to-door service. Availability depends on location. Not available for students in Early Drop-off/After School</i>		FREE

MIDDLE SCHOOL (5-8) DIVISION

	HOURS	SEPTEMBER TO JUNE
Application for Admission Fee <i>Payable upon submission of this form</i>		\$200
Book and Supplies Fee		\$240
Parent Association Fee (includes fees for trips and special programs throughout school year)		\$175
Facilities Fee (for expenses related to maintenance of children's classrooms and play spaces)		\$135
Security Fee (for expenses related to providing security to the school site)		\$250
Regular Tuition	8:15 am – 4:15 pm	\$14,800
After School / Homework Help	<i>Provided by third-party vendor</i>	
Transportation <i>FREE Busing available from Dept. of Education, though it's NOT door-to-door service. Availability depends on location. Not available for students in After School</i>		FREE

IMPORTANT - PLEASE NOTE:

- For Grades K-8: There is a 10% Sibling Discount for each additional child enrolled from the same family.
- **On winter Fridays, school closes at 1 pm. On fall, spring & summer Fridays, school closes at 3 pm.**
- Extended care is not available on Fridays or on early dismissal days.
- **Tuition assistance** is available to qualifying families of students in Pre-K through Grade 8. The amount of aid awarded each year is based on documented need (including tax returns). All information submitted is kept strictly confidential. When completing the application for admission, check the appropriate box on the application to indicate that you are requesting tuition assistance. The School Office will forward all necessary forms to you with instructions and deadlines.



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TRANSCRIPT REQUEST
(FOR NEW STUDENT APPLICANTS TO GRADES 1 - 8)

TO PARENT: Please complete this cover letter and submit pages 7-10 to applicant's current or last attended school so that they can then forward transcript information and recommendations to our office.

I hereby give permission for:

Name of Current School

Street Address

City, State, Zip

To release all records pertaining to:

Student's Name

Records should include:

- Current semester report card
• Report Cards of two prior school years
• Results of most recent Standardized Tests
• IEP or other relevant Educational Evaluations / Reports
• Record of any Disciplinary Actions or Behavior Modification Plans
• Samples of student work and writing
• Teacher Recommendation Form (see attached)

And to forward those records to:

Mazel Day School
ATT: ADMISSIONS
60 West End Avenue, Third Floor
Brooklyn, NY 11235
718-368-4490
admissions@mazeldayschool.com

Parent's Signature

Date



TEACHER RECOMMENDATION

(FOR NEW STUDENT APPLICANTS TO PREK – GRADE 8)

Name of Student Applicant: _____

First Name

Last Name

Current Grade of Student Applicant: _____

TO TEACHER: Thank you for taking the time to complete this recommendation form. Please be candid about this student's abilities and performance in your classroom. We understand the difficulty in evaluating a student and are fully aware that children are constantly growing, changing and developing. This form is only one piece of the student's profile in his/her application process. All information is confidential and will only be used for admission purposes. When complete, please place this form in a sealed envelope, placing your signature on the seal line to ensure confidentiality. We appreciate your help in sharing your experience with this Student.

Teacher's Name

School

Position

Date Form was Completed

Contact Phone Number

Hours you are available _____ to _____ AM/PM

1. How long and in what capacity have you known the Student? _____

2. Class size the Student is currently in : _____

3. How would you describe the Student's overall personality? _____

4. Please describe the Student's strengths: _____

5. Please describe areas in need of further development: _____



6. Please describe the Student's interests or hobbies: _____

7. Please describe the Student's performance in these areas:

Social and Peer Relationships are

Advanced Age-appropriate Emerging An area of concern.

Explain:

Behavior/Maturity is

Advanced Age-appropriate Emerging An area of concern.

Explain:

Ability to keep with the class and transition between activities is

Advanced Age-appropriate Emerging An area of concern.

Explain:

Academic Abilities are

Advanced Age-appropriate Emerging An area of concern.

Explain:

Language and Communication Skills are

Advanced Age-appropriate Emerging An area of concern.

Explain:

Ability to pay attention, listen and follow directions is

Advanced Age-appropriate Emerging An area of concern.

Explain:

Emotional Development (self-image, confidence, ability to deal with frustration) is

Advanced Age-appropriate Emerging An area of concern

Explain:



Independence, Self-Care and Responsibility is

- Advanced Age-appropriate Emerging An area of concern

Explain:

8. The Student's school attendance is Regular Not Regular

Explain:

9. Are you aware of any independent evaluations or services being provided for physical, emotional or academic reasons regarding this student?

- Yes* No Don't Know

Are there any evaluations or services that you feel should be provided due to physical, emotional or academic concerns regarding this student? Yes* No Don't Know

Does this Student receive any type of special accommodations?

- Yes* No Don't Know

*If yes, please explain:

10. What forms of motivation did you find to be the most effective in working with this Student:

11. Please describe your relationship with the Student's parents in the course of your work with their child (level of parent involvement, cooperation, communication, etc.):

12. Are you aware of any special family or health circumstances relevant to this Student?

*Please return completed recommendation form in a sealed envelope, placing your signature on the seal line to ensure confidentiality, **by February 10th, 2017**, to:*

*Mazel Day School
ATT: ADMISSIONS
2901 Brighton 6th Street
Brooklyn, NY 11235*