

# TUSTIN HEBREW HIGH

A BRANCH OF ORANGE COUNTY HEBREW HIGH/CYPRESS/MISSION VIEJO/YORBA LINDA/TUSTIN  
2351 Sunningdale Dr. Tustin, CA 92782 ♦ (714) 508-2150  
[www.JewishTustin.com](http://www.JewishTustin.com)

Dear Students and Parents,

Welcome to the Tustin Hebrew High. You made a great choice. The program provides an excellent opportunity for our teenage students to satisfy their foreign language needs (10 credits per year) while receiving a meaningful Jewish education.

Enclosed please find some information on the curriculum. If you have any questions, please call me at 714-508-2150.

Rabbi Shuey Eliezrie  
Director

## School information

**Curriculum:** Students will participate in a class on Modern Hebrew that includes comprehension, verb conjugation, grammar and cursive writing. They will be grouped according to level. They will also participate in Judaic Text Study. This course (depending on the level) is comprised of texts that include the books of N'viim (Prophets); Mishna (Jewish Law); and Pirkei Avot (ethics and social interaction). Our instructors work closely together to present a curriculum that is both stimulating and thought provoking. Ancient texts come to life as students are encouraged to discover their deeper meanings and their relevance to our day and age.

**Hours and location:** School hours are Wednesday 5:30pm-8:30pm. All classes are held at Chabad of Tustin, 2351 Sunningdale Dr, Tustin, 92782. After your application has been accepted a full detailed calendar will be sent to you.

**Tuition:** \$975 per year. Scholarship application upon request.

**Credits:** Students who complete the requirements of Tustin Hebrew High will receive up to 10 foreign language credits per year on transcripts from the Hebrew Academy of Huntington Beach, a WASC accredited school.

# Hebrew High Application 2008/09

**Application and Interview:** Send this application along with a \$75 deposit and a private interview will be set up.

**Student's Name :** \_\_\_\_\_ **Birthday:** \_\_\_\_/\_\_\_\_/19 \_\_\_\_

**Father's Name:** \_\_\_\_\_ **Mother's Name:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Name of School Counselor:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**School Address:** \_\_\_\_\_

**Synagogue Affiliation:** \_\_\_\_\_ **Any conversions?**  Parent  Student  None

To the best of your ability, please rate the student's knowledge of the Hebrew language:

Reading:  no prior knowledge  some prior knowledge  fair  good  excellent

Comprehension:  no prior knowledge  some prior knowledge  fair  good  excellent

Cursive writing:  no prior knowledge  some prior knowledge  fair  good  excellent

Does your child have any learning difficulties with general studies? \_\_\_\_\_

**Are there any medical conditions or pertinent information regarding your child, which we should be aware of?** \_\_\_\_\_

## EMERGENCY CONTACT

Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

I hereby permit my child/ren to participate in all school and youth club activities and join in school trips on and beyond school properties. You may use my child's photograph for school publicity. In case of emergency, I hereby authorize the school to have my child taken care of by a physician in any way the situation may call for.

PARENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

- I would be willing to help in school activities
- I would be willing to assist in fundraising/administrative activities

**Please mail to: Chabad of Tustin Hebrew High: 2351 Sunningdale Dr, Tustin 92782**