

St. Petersburg Seminary and Yeshiva
An Association between St. Petersburg Theological Seminary and Netzer David International Yeshiva 3190 Gulf to Bay Blvd., Clearwater, Florida 33759

727-669-0276

https://www.sptseminary.edu

APPLICATION

□ For Admission □ For Readmission				
Last Name	First Name	Midd	le Name	
Previous Name(s) (If any)				
, , , , , , , , , , , , , , , , , , ,				
G 1 M1 F 1				
Gender □ Male □ Female Date of Birth (please use MM/DD/	VVVV format)			
Permanent Address (street)	(city)	(state)	(zip)	
Termanent reduces (street)	(City)	(state)	(Zip)	
Mailing Address (if different)	(city)	(state)	(zip)	
(street)				
Home Phone (area code and number)		Cell Phone (area code and number)		
Work Phone (area code and number	r)	Email Address:		
Social Security Number				
In Emergency Notify				
Name		Phone (area code and number)		
Work Phone (area code and number):		Relationship:		
N. CGI I G	1	D		
Name of Church or Synagogue you attend		Denomination		
Are you a US Citizen? □ Yes	□ No			
If no, what country are you a citizen	n of?			
TC 1	137			
If no, what is your Immigration and	Naturalization status?			
If you are a permanent resident, wh	at is your green card number?			
J = 2 = 2 = F ==========================				

Application Revised 5/8/2019

The law requires that we ask about th	e ethnic origins of	our stude	nts. Please check	the ap	propriate box:	
		☐ American Indian/Alaska Native				
☐ Asian/Pacific Islander		□ Hispanic				
□ White/Non-Hispanic		□ Other (Please state)				
□ Unknown						
Have you been convicted of a crime a		ecord expu	inged or sealed?	$\Box Y$	es □ No	
What is the crime you were convicted	l of?					
<i>J</i>	No					
Education Plans		This section to be filled in by Admissions Office:				
☐ Certificate of Religious Studies	Student ID number:					
☐ Certificate in Cantorial Arts	☐ Transfer Student¹					
☐ Bachelor of Arts in Religious Stud	☐ Associates of Arts Degree¹					
☐ Bachelor of Arts in Judaic Studies	☐ Graduate School Ready¹(undergrad. major)					
☐ Master of Divinity Degree		☐ International Student¹				
		☐ Adult, non-high school grad, never enrolled in				
☐ Master of Arts in Biblical Studies		college ²				
☐ Master of Arts in Judaic Studies		☐ Audit (personal enrichment)³				
☐ Master of Rabbinic Studies		☐ Senior Audit (ages 65 and older)³				
□ Doctor of Ministry		☐ Denominational Preparation¹				
☐ UMJC – Licensure and Ordination Courses		☐ Working toward degree elsewhere¹				
□ Audit	□ Audit		1 Transcripts and references required			
□ Senior Audit		2 References only are required				
		3 Neither transcripts nor references required				
Educational Background						
Name of High School or GED progra	SS			City & State		
College/University Record. Please	list EVERY colle	ege or univ	ersity you attend	ded pr	ior to applying to the	
Seminary. You are to include all school						
each school send an official transcript	t to the Seminary.	Use additi	onal pages, if red	quired.	•	
Name of School						
			□ Yes □ No		•	
			☐ Yes ☐ No			
			□ Yes □ No			
				1		
On a separate sheet of paper, please v L-rd. Include your reasons for wanting			• .		•	
use your education	s to attend the St.	cicisouig	Schimary and 1	COIIIV	i, and now you plan to	
A NON REFUNDABLE application	fee of \$50.00 mus	st accompa	any this form. T	he app	olication fee for Audit	
or Senior Audit is \$25.00						
at .						
Signature			Date			

Application Revised 11/29/22