



Please use this checklist as a reference to guide you through Kadima's Admission Process.

- Visit:** Please contact the Admissions Office at (818) 346-0849 or admissions@kadimaacademy.net to arrange for a private tour or to RSVP for an Open House.
- Apply:** A complete application includes:
 - Signed application form with non-refundable application fee of \$100.00
 - Copy of applicant's birth certificate
 - Recent photo of applicant (optional)
 - Completed Parent/Guardian Questionnaire
 - Completed Student Questionnaire (Middle School applicants grades 6-8 only)

Please keep a copy of the application for your records. All materials must be received by **January 31**; only applications submitted by the deadline are guaranteed to receive notification by the March decision date. Applications received after the deadline are processed on a space-available basis and will receive notification on a rolling basis. Incomplete files *are not considered* for admission.

- Request Letters of Recommendation & Academic Records:** Print the child's name, age, and date of birth on the forms and fill out the top portion, and provide the following documentation to the child's current school:
 - Signed parent Authorization for Release of Student Records
 - Confidential School Recommendation Form
 - **Kindergarten:** Confidential Teacher Recommendation Form
 - **Grades 1 - 8:** Confidential Language Arts/English Teacher Recommendation Form and Confidential Math Teacher Recommendation Form
 - Return envelopes (please provide postage)
 - Official transcripts must be mailed directly from the school to Kadima.

These documents must be returned to Kadima by **January 31**.

- Participate in Interviews and Assessments:** All applicants are assessed as part of the admission process. When the application is complete, the Admissions office will contact you to schedule the assessment, a parent interview and/or student interview (student interviews are required only for Middle School applicants in grades 6-8). Assessments for grades K and 1 take place in small groups; applicants for grades 2 - 8 grade participate in the classroom for part of the school day and meet for an individual assessment.
- Wait for Notification:** Admission notification letters are mailed in mid-March. Contracts and enrollment deposits must be returned to Kadima within two weeks to secure the child's space. Tuition assistance is available for families with students enrolled in grades K-8 who qualify; please contact the Finance Office at (818) 346-0849 x115 to request an application for tuition assistance.

Kadima Day School is a non-profit educational institution that does not discriminate on the basis of race, color, nationality, or ethnic origin in student admission policies.

Applicant's Name: _____

School History

Please include name of schools, preschools etc. attended by the applicant.

School Name:	Dates Attended:	Telephone:
Current: _____	_____	_____
Previous: _____	_____	_____
Previous: _____	_____	_____

Questions

Please list any siblings NOT currently enrolled at Kadima Day School.

Name:	Gender:	Date of Birth:	Present School/Grade:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please list any relatives who currently attend or who have graduated from Kadima Day School.

Name:	Relationship:	Dates of Attendance/Graduation Year:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Language(s) spoken at home: _____
Current synagogue affiliation(s): _____
How did you hear about Kadima? _____

Signature

Please submit this completed application with a \$100.00 non-refundable application fee (payable to Kadima Day School) by January 31.

I/We certify that the information provided on this application is true and accurate.

Signature of Parent/Guardian A

Relationship to Applicant

Date

Signature of Parent/Guardian B

Relationship to Applicant

Date

Kadima Day School is a non-profit Jewish day school that does not discriminate on the basis of race, color, nationality, or ethnic origin in student admission policies.



Applicant's Name: _____

We appreciate your time in answering the following questions to help us get to know the applicant in greater detail. Please feel free to submit additional pages as necessary.

Why are you considering Kadima Day School for your child's education?

How does Kadima Day School fit into the long-range educational plans for the applicant?

Describe something the applicant loves to do.

Please identify any past or present special circumstances, including medical, psychological or academic in the applicant's history of which the school should be aware. Please be specific and include any relevant supporting documentation as attachments (for example: IEP, 504, psychological assessments, attendance records).

In what ways might Kadima Day School contribute to the enrichment and deepening of your family's life?

Please feel free to offer additional comments about your child.

Kadima Day School is a non-profit Jewish day school that does not discriminate on the basis of race, color, nationality, or ethnic origin in student admission policies.



Applicant's Name: _____

What do you like to do in your free time?

The thing I like most about myself is:

My greatest accomplishment is:

I get frustrated when:

I like being Jewish because:

Describe two of your heroes and why they are your heroes:

Something I'd like to learn is:

In Middle School, I would like to be able to:

Kadima Day School is a non-profit Jewish day school that does not discriminate on the basis of race, color, nationality, or ethnic origin in student admission policies.



**TRANSCRIPT/STUDENT RECORDS
RELEASE AUTHORIZATION**

Please complete the information below and submit this release to the applicant's current school.

Applicant's Name: _____ Present Grade: _____

Name of School: _____

Address: _____

Telephone: _____ Contact Person: _____

Authorization is hereby given for the transfer of all applicable information for the above named student. Please release the following Records:

1. Transcript of academic record, including courses taken and grades received
2. Results of standardized and/or aptitude tests
3. Copies of special personal evaluations, psychological reports or IEPs
4. Attendance records

I/We understand and agree that all recommendations and evaluations are confidential and will not be disclosed to me/us.

Signature of Parent/Guardian: _____ Print Name: _____

Relationship to Applicant: _____ Date: _____

Please send by January 31 to:

Kadima Day School
Office of Admissions
7011 Shoup Avenue
West Hills, CA 91307
(818) 346-0849 phone
(818) 346-0372 fax

Public Record File
Public Law 93-380, Section 438

Kadima Day School is a non-profit Jewish day school that does not discriminate on the basis of race, color, nationality, or ethnic origin in student admission policies.



6. Administrator Recommendation

CONFIDENTIAL

To the Parent/Guardian:

Please complete the information requested below and submit this form to the applicant's current school.

Applicant's Name: _____ Date of Birth: _____

Applying for grade: _____ in September of: _____

To the Administrator:

Name/title of person completing this form _____

School Name _____ Telephone Number (_____) _____

School Address _____
Street City State Zip

Kadima Day School educates students through a comprehensive, fulfilling and outstanding Judaic and general studies curriculum. Kadima seeks to produce graduates who are literate communicators, self-aware individuals, problem solvers, collaborative workers and lifelong learners who live socially responsible Jewish lives.

Your completion of this evaluation will help us to ensure that the child's next school will be an appropriate one for both the applicant and the family. Your valued observations will be used solely for the admission process; your professional comments will be held in strictest confidence and will only be used for admissions purposes and will not become part of the student's permanent record file.

In the space below, please share your observations relating to the applicant's academic ability, work habits, classroom behavior, integrity, relationships with and respect for peers and adults, initiative, attitude and emotional maturity. If you need additional space, please feel free to attach a separate letter.

RECOMMENDATION:

	Not Recommended	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically
For Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Character & Personal Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendation For Admission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please complete both sides of the recommendation form.

Applicant: _____

Applicant Information

	Advanced	Grade/Age Appropriate	Needs Development	Possible Area for Concern
Academic achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consideration of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social adjustment with peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Family Information

	Consistently	Usually	Sometimes	Rarely
Communicates openly with school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attends school functions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperates with classroom teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperates with administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows schools policies and rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in school community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates in child's education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has realistic expectations for this child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meets financial obligation in timely manner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Has the applicant been subject to any serious disciplinary action, suspension, or expulsion from your school? If yes, please explain:

Check here if you would like to discuss this applicant in greater detail.

For how long have you known the applicant? _____ First date of enrollment in your school: _____

Additional Comments:

ADMINISTRATOR'S SIGNATURE

DATE

Please return this completed form by January 31.

Your judgments are solely used for the admission process, are held in strictest confidence and will not become part of the student's permanent record file. Thank you in advance for the assistance your comments provide.



CONFIDENTIAL

To the Parent/Guardian:

Please complete the information requested below and submit this form to the applicant's current school.

Applicant's Name: _____ Date of Birth: _____

Applying for grade: _____ in September of: _____

To the Teacher:

Thank you for taking the time to complete this form. Your insights and observations will be held in strictest confidence, will be used only for admission purposes and will not become part of the applicant's permanent record file. Your completion of this evaluation is extremely helpful.

Social and Emotional Development	Mature	Age Appropriate	Needs Development	Immature
Listens	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cooperates	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relates to peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhibits self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adjusts to transitions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tolerates frustration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separates from parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shares materials and possessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Functions independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asks for help when needed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Physical Development	Mature	Age Appropriate	Needs Development	Immature
Fine motor control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gross motor control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handedness established Yes/No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Cognitive Development	Mature	Age Appropriate	Needs Development	Immature
Expresses ideas orally	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Articulates clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sustains attention in small groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sustains attention in large groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grasps concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recalls details	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates an interest in learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utilizes materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows directions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please complete both sides of the recommendation form.

Applicant's Name: _____

Comments:

Are there any special needs or required modifications for this student? _____

If "yes," please explain:

For how long and in what capacity have you known this applicant: _____

Is there anyone else at your school who you feel we should contact in order to fairly evaluate this student? If so, whom? _____

If there is there any information that could be better conveyed in a phone conveyed in a phone conversation, please indicate so and an official from our school will be glad to contact you. Yes/No

School Name: _____ Telephone Number: (_____) _____

School Address: _____

Teacher's Name: _____

Teacher's signature: _____ Date: _____

Please return this completed form by January 31.

Your judgments are solely used for the admission process, are held in strictest confidence and will not become part of the student's permanent record file. Thank you in advance for the assistance your comments provide.



CONFIDENTIAL

To the Parent/Guardian:

Please complete the information requested below and submit this form to the applicant's current school.

Applicant's Name: _____ Date of Birth: _____

Applying for grade: _____ in September of: _____

To the Teacher:

The above named student has applied for admission to Kadima Day School. Your insights and observations will be held in strictest confidence, will be used only for admission purposes, and will not become part of the applicant's permanent record file. Your completion of this evaluation is extremely helpful.

Name/title of person completing this form _____

School Name _____ Telephone Number (_____) _____

School Address _____
Street City State Zip

Kadima Day School educates students through a comprehensive, fulfilling and outstanding Judaic and general studies curriculum. Kadima seeks to produce graduates who are literate communicators, self-aware individuals, problem solvers, collaborative workers and lifelong learners who live socially responsible Jewish lives.

In the space below, please share your observations relating to the applicant's academic ability, work habits, classroom behavior, integrity, relationships with and respect for peers and adults, initiative, attitude and emotional maturity. If you need additional space, please feel free to attach a separate letter.

What textbook(s) do you currently use? Math: _____ English: _____

Recommendation:

	Not Recommended	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically
For Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Character & Personal Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendation For Admission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please complete both sides of the recommendation form.

Applicant's Name: _____

Your judgments are used solely for the admission process, are held in strictest confidence, and will not become part of the applicant's permanent record file.

Academic and Personal Evaluation: (Please circle your response.)

Academic potential	limited	fair	good	outstanding
Academic achievement	considerably below	as expected	better than tests	far above expectations
Effort/drive	limited	sporadic	usually good	maximum
Study habits	poor	fair	good	excellent
Ability to work in a group	has great difficulty	sometimes has difficulty	usually effective	always works well
Ability to work alone	needs much help	needs help frequently	needs help occasionally	always works well
Participation in discussion	rarely contributes	wants to dominate	contributes occasionally	joins in readily
Curiosity	limited	occasional	frequent	consistent
Reads for pleasure	rarely	if prodded	occasionally	frequently
Classroom conduct	frequent disruptions	occasional misconduct	usually good behavior	good conduct
Written expression/content	poor	limited	good	excellent
Written expression/mechanics	poor	limited	good	excellent
Ability to express ideas orally	limited	has some difficulty	good	exceptional
Daily preparation	poor	fair	good	excellent
Imagination	little	fair	active	highly imaginative
Use of time	uses poorly	occasionally wastes	usually uses well	always uses effectively
Follows directions	rarely	needs much explanation	occasionally needs help	quickly and effectively
Critical thinking	limited	fair	frequently perceptive	exceptionally perceptive
Seeks help when needed	rarely	occasionally	usually	always
Attention span	easily distracted	occasionally distracted	usually good	exceptionally good
Leadership potential	a follower	leads when given responsibility	seeks opportunities (and uses them well)	a natural leader
Initiative	never initiates	rarely shows initiative	occasionally initiates	often initiates
Stability	easily frustrated	seeks much attention	somewhat tense	stable
Integrity	questionable	usually trustworthy	trustworthy	highly developed
Consideration of others	rarely considerate	usually considerate	considerate	extremely thoughtful
Social adjustment with peers	relates poorly	has occasional problems	usually relates well	healthy relationships
Sense of humor	rarely laughs or smiles	fair	good	delightful
Self-confidence	needs much reassurance	appears overly confident	needs some support	positive self-image
Parent communicates w/ school	rarely	sometimes	usually	always
Parent cooperation	unknown	uncooperative	fair	good

Check here if you would like us to call you to discuss this student in greater detail.

For how long have you known this applicant? _____

Teacher's Name: _____

Grade/Subject: _____

Teacher's signature: _____

Date: _____



CONFIDENTIAL

To the Parent/Guardian:

Please complete the information requested below and submit this form to the applicant's current school.

Applicant's Name: _____ Date of Birth: _____

Applying for grade: _____ in September of: _____

To the Teacher:

The above named student has applied for admission to Kadima Day School. Your insights and observations will be held in strictest confidence, will be used only for admission purposes, and will not become part of the applicant's permanent record file. Your completion of this evaluation is extremely helpful.

Name/title of person completing this form _____

School Name _____ Telephone Number (_____) _____

School Address _____
Street City State Zip

Kadima Day School educates students through a comprehensive, fulfilling and outstanding Judaic and general studies curriculum. Kadima seeks to produce graduates who are literate communicators, self-aware individuals, problem solvers, collaborative workers and lifelong learners who live socially responsible Jewish lives.

In the space below, please share your observations relating to the applicant's academic ability, work habits, classroom behavior, integrity, relationships with and respect for peers and adults, initiative, attitude and emotional maturity. If you need additional space, please feel free to attach a separate letter.

What textbook(s) do you currently use? _____

Recommendation:

	Not Recommended	Without Enthusiasm	Fairly Strongly	Strongly	Enthusiastically
For Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
For Character & Personal Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recommendation For Admission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please complete both sides of the recommendation form.

Applicant's Name: _____

Your judgments are used solely for the admission process, are held in strictest confidence, and will not become part of the applicant's permanent record file.

Academic and Personal Evaluation: (Please circle your response.)

Academic potential	limited	fair	good	outstanding
Academic achievement	considerably below	as expected	better than tests	far above expectations
Effort/drive	limited	sporadic	usually good	maximum
Study habits	poor	fair	good	excellent
Ability to work in a group	has great difficulty	sometimes has difficulty	usually effective	always works well
Ability to work alone	needs much help	needs help frequently	needs help occasionally	always works well
Participation in discussion	rarely contributes	wants to dominate	contributes occasionally	joins in readily
Curiosity	limited	occasional	frequent	consistent
Reads for pleasure	rarely	if prodded	occasionally	frequently
Classroom conduct	frequent disruptions	occasional misconduct	usually good behavior	good conduct
Written expression/content	poor	limited	good	excellent
Written expression/mechanics	poor	limited	good	excellent
Ability to express ideas orally	limited	has some difficulty	good	exceptional
Daily preparation	poor	fair	good	excellent
Imagination	little	fair	active	highly imaginative
Use of time	uses poorly	occasionally wastes	usually uses well	always uses effectively
Follows directions	rarely	needs much explanation	occasionally needs help	quickly and effectively
Critical thinking	limited	fair	frequently perceptive	exceptionally perceptive
Seeks help when needed	rarely	occasionally	usually	always
Attention span	easily distracted	occasionally distracted	usually good	exceptionally good
Leadership potential	a follower	leads when given responsibility	seeks opportunities (and uses them well)	a natural leader
Initiative	never initiates	rarely shows initiative	occasionally initiates	often initiates
Stability	easily frustrated	seeks much attention	somewhat tense	stable
Integrity	questionable	usually trustworthy	trustworthy	highly developed
Consideration of others	rarely considerate	usually considerate	considerate	extremely thoughtful
Social adjustment with peers	relates poorly	has occasional problems	usually relates well	healthy relationships
Sense of humor	rarely laughs or smiles	fair	good	delightful
Self-confidence	needs much reassurance	appears overly confident	needs some support	positive self-image
Parent communicates w/ school	rarely	sometimes	usually	always
Parent cooperation	unknown	uncooperative	fair	good

Check here if you would like us to call you to discuss this student in greater detail.

For how long have you known this applicant? _____

Teacher's Name: _____

Grade/Subject: _____

Teacher's signature: _____

Date: _____



Kadima Day School is committed to making Jewish Day School education accessible to students regardless of their financial resources. We offer several payment options and a tuition assistance program for those who qualify.

TUITION	Kindergarten	Grades 1-5	Grades 6-8
Single Pay by Cash or Check:	\$16,145	\$18,100	\$20,450
Extended Pay:	\$16,500	\$18,500	\$20,900

- **Application Fee:** \$100 per applicant.
- **Additional Fees:** The Parent Organization fee is \$100 per student. Families may also incur extra fees for other expenses, depending on the grade level, which include but are not limited to: hot lunch program, PE uniforms, class trips, culmination/graduation fees, class photos, etc.
- **Tuition Assistance:** Need based tuition assistance is available. There is a \$50 application fee per family.

PAYMENT OPTIONS

- **Single Payment.** The tuition amount for those choosing to pay in full by cash, check or money order is \$16,145.00 for Kindergarten; \$18,100.00 for Grades 1-5; and \$20,450.00 for Grades 6-8. A non-refundable deposit of \$1,500, which is applied to tuition, is due with your enrollment contract. The balance of the tuition is due in April.
- **Extended Payment Plan.** The tuition amount for those choosing to pay on our extended payment plan is \$16,500 for Kindergarten; \$18,500 for Grades 1-5; and \$20,900 for Grades 6-8. A non-refundable deposit of \$1,500, which is applied to tuition, is due with your enrollment contract. The balance of the tuition is paid through automatic checking/savings account debit in ten equal installments beginning in April.
- **Tuition Refund Plan (TRP).** Because the financial commitment of enrollment is for an entire year, Kadima Day School offers a Tuition Refund Plan. The TRP is elective with the single payment option for an approximate charge of 2.2% of the total tuition and provides for a refund of 50% of unused tuition.

If you have questions related to tuition, fees or tuition assistance, please call Arnold Rudnick, Director of Finance at (818) 346-0849 x115 or e-mail arudnick@kadimaacademy.net.