YIDDP YESHIVA INITIATIVES EDUCATIONAL PROGRAMS		Ŵ	BELLEVU
Applicati	on for	Admissi	on
Rabbi/Mr./Mrs./Ms.:	First	Middle Initial	Maiden Name (or other)
Please identify the program(s)/area of study that ye	ou are interested in:		
Bachelor of Arts (BA) Bachelor of Science (BS	5)		
Major/Program Must Be Filled In			
Business Behavioral Science Human Serv	/ices		
MA Educational Leadership MS Clinica	al Counseling		

MBA, Master of Business Administration

Location: YIEP 🗹 Online

ADMISSION CHECKLIST

Thank you for applying to Bellevue University

In order for the University to process your application efficiently, your application must be completed, signed, and submitted to YIEP with the non-refundable application fee. Please follow the steps below.

Undergraduate Applicants

- Complete, sign, and submit Application for Admission
- Request official high school transcript(s)
 - If eligible for transfer credit:
 - Request official transcript(s) from previously attended colleges or universities, <u>Yeshiva and Seminary</u>
 - Submit corporate or training certificates
- Submit \$1000 fee (non-refundable if you are accepted to the program) with application

Graduate Applicants

- Complete, sign, and submit Application for Admission
- Request official transcript(s) from previously attended colleges or universities, <u>Yeshiva and Seminary</u>
- Submit \$1000 fee (non-refundable if you are accepted to the program) with application

REQUIRED DOCUMENTATION

1. Transcript or Diploma

Copies of transcripts or diplomas must be submitted. Student copies are acceptable only for preliminary evaluation. <u>Official transcripts</u> <u>are required and should be ordered as soon</u> <u>as possible.</u> A transcript request form can be found at www.bellevue.edu

Send your official transcripts to: YIEP 567 Cedarhill Road

Far Rockaway, New York 11691

2. Copies of Training and Certificate

If you would like your professional and academic training or certification classes considered for the award of credit, submit verification of your completion of these programs to: YIEP.

3. Financial Services

Visit www.bellevue.edu for all financial aid information.

Non-refundable Application Fee: Undergraduate: \$1000 • Graduate: \$1000

Submit your application, admission fee, official copies of diplomas and transcripts, and other required items to:

YIEP, 567 Cedarhill Road, Far Rockaway, NY 11691

For more information, contact us at: theYIEP@Gmail.com or call 917-209-8204

Or visit us at www.theYIEP.com

Bellevue University Admission Application

Bellevue University is an open admissions university. Once you submit your application, we will begin the process of evaluating your credits and developing your degree plan. You will have access to B.R.U.I.N. (Bellevue Real-Time User Information Network), where you can track your degree progress and access all administration and registration activities.

SECTION 1 – PERSONAL INFORMATION

Rabbi/Mr./Mrs./Ms.			
Last	First	Middle Initial	Maiden Name (or other)
Social Security Number		Date of birth (mm/dd/yyyy)	
Mailing address (Number & Street)			
City	State/Province	ZIP/Postal Code	Country
Permanent address (if different) (Numl	per and Street)		
City	State/Province	ZIP/Postal Code	Country
Preferred contact method: 🔲 Email 🕻	🕽 Home phone 🗔 Work phone	Cell phone Best time to c	all: (Days/Time)
Home phone (area code)		_ Work (area code)	
Cell (area code)	Fax numl	ber	
Email address type: 🔲 Home 🔲 Busir	ness 🔲 Other		
Email address (Please write clearly)			
Country of citizenship	Cou	ntry of birth	
If you are not a U.S. Citizen,what is you	r visa type? <u>N/A</u> (only needed to attend class	Are you currently in t	:he United States? 🔲 Yes 🗋 No
Are you a permanent resident? 🔲 Yes	No		
Ethnic Data: (for university's statistical	records)		
DNon-Resident DBlack-American,	non-Hispanic 🛛 Native Amei	rican or Alaskan	
Asian/Pacific Islander Dispanic	or Latino/Latina 🛛 White, no	n-Hispanic	
🗋 Mexican American 🔲 Other			
Gender: 🔲 Male 🔲 Female			
Marital Status: 🔲 Single 🔲 Married	Divorced Separated	Widowed	
Are you currently in the U.S. military?	Yes No Are you a U.S.	veteran? 🔲 Yes 🛄 No	
If yes, what branch of service			
Are you applying under the Serviceme	mbers Opportunity College (SC	DC) network? 🔲 Yes 🛄 No	

SECTION 2 – HIGH SCHOOL INFORMATION (Undergraduates Only)

High School Name	City & State		Graduation date
Home school (City & State)	GED (C	ity & State)	
Complete the following questions if you are a c	current high school student or have gradu	ated within the last two years – c	otherwise skip to Section 3
Have you taken the ACT? 🔲 Yes 🔲 🛛	No When?	Composite Score	e
Have you taken the SAT? 🔲 Yes 🔲	No When?	SAT	VM
SECTION 3 – ACADEMIC H	ISTORY		
Have you attended Bellevue University	y previously? 🔲 No 🛄 Yes – A	pproximate dates of attend	lance
Which best describes the type of appli	icant you are: 🛛 🔲 High School St	udent 🛛 Transfer Student	🔲 First Year Student
	🔲 Undergraduate	Accelerated or Cohort	Graduate
Please list all colleges/universities, Yeshiva/Se lege/university/Yeshiva /Seminary sent directi	, , , , , , , , , , , , , , , , , , , ,	,	transcripts from each high school/col-
Full Name of Institution	State Dates Attended	Degree (AAS, BS, BA, etc.) (Credits Earned Graduated: No/Yes
1			
2			
3			
4			
5			
Other sources of academic credit (plea	se check all that apply):		
Corporate Training: 🔲 Yes 🔲 No	YIEP Transfer Cr	edit	
CLEP/DSST/AP	License (e.g., R.N., EMT, Insurar	nce, Real Estate, Pilot, Police	, etc.)
Professional Certification			
Other			
Have you been suspended from anoth	er college/university within the pa	ast five years? 🔲 Yes 🔲 N	0
If yes, what institution and when			
SECTION 4 – EMPLOYMENT			
Graduate and accelerated program applicants	must provide employment information f	or past three years.	
Employer/Company	Position Address/Cit	y/State/ZIP/Country	Dates employed FT/PT
1			
2			
3			

4._____

SECTION 5 – MARKETING INFORMATION

How did you hear about YIP ? 🛛 🗹 🕚	YIEP advertisement
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🗋 Radio 🗋 Newspaper 🗋 Television 🗋 Word-of-mouth 🗋 Website 🗋 Direct Mail 🗋 Other ______

SECTION 6 - FINANCIAL PLANNING SECTION (F-1 International Students only qualify for the student payment option)

Please let us know which payment plan(s) you intend to use (please check all that apply):

	🔲 Financial Aid (grants, loans, scholarships)	🔲 Corporate Reimbursement	Direct Corporate Billing
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Corporate Tuition Assistance Military T.A. Veterans Benefits (G.I. Bill, Voc. Rehabilitation)

Student Payment (cash, check, credit card)

SIGNATURE SECTION/VERIFICATION OF INFORMATION

I certify that I have read this form and that all information submitted is true and accurate. Bellevue University does not discriminate on the basis of sex, age, race, religion, color, national origin, or disability in its admission, employment, and education programs or activities.

Signature of Student:__

Date:

Non-refundable Application Fee:

Undergraduate: \$1000 Graduate: \$1000

Enclose your check and mail to: YIEP 567 Cedarhill Road Far Rockaway, NY 11691

A non-profit university, Bellevue University is accredited by The Higher Learning Commission and a member of the North Central Association of Colleges and Schools. Bellevue University does not discriminate on the basis of age, race, color, religion, sex, national origin, or disability in the educational programs and activities it operates.



STUDENT INFORMATION RELEASE AUTHORIZATION

In compliance with the federal Family Educational Rights and Privacy Act (FERPA) of 1974 Bellevue University is prohibited from providing protected information from your educational record to a third party, not exempt by the act, without consent. Information related to the student and maintained by the institution may be included in the educational record.

You may, at your discretion, grant the University permission to release information about your educational record to a third party. By selecting one of the options below you are providing consent to release the corresponding information to the recipient provided below. A separate authorization form is required for each third party to whom you grant access. Your consent to release information has no expiration date; however, you may revoke your authorization at any time. Please contact the Registrar's Office at 800.756.7920 option 0 for more information.

Requested By (Student):		Release To (Recipient):	
	Name	The YIEP, Rabbi Pesach Lerner	Name
	Student ID	TheYIEP@gmail.com	Email
	Social Security #		Mailing Address

All Education Records: including both academic and financial records.

Academic Records Only: Including but not limited to, grades/GPA, demographic, registration transactions, attendance and enrollment information.

Financial Records Only: Including but not limited to, billing statements, account transactions, collection activity, military benefits, financial aid eligibility, disbursement, application data and satisfactory academic progress.

Student's Signature_____

Date

> Requests require a copy of the student's government issued ID and signature.

Please complete appropriate information, and return to the Registrar's Office by fax or mail. Registrar's Office fax number: 402-557-5498

Please send a copy to the YIEP: TheYIEP@gmail.com | Fax: 718.327.0307



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Requested By (Student):		Release To (Recipient):*	
	Name		Name
	Student ID		Email
	_Social Security #		Mailing Address

Check all that apply:

All Education Records: including both academic and financial records.

C Academic Records Only: Including but not limited to, grades/GPA, demographic, registration transactions, attendance and enrollment information.

Financial Records Only: Including but not limited to, billing statements, account transactions, collection activity, military benefits, financial aid eligibility, disbursement, application data and satisfactory academic progress.

* Please print names of all individuals who will need to interact with the university regarding your academic record, financial aid, tuition payments, etc. (parents, guardians, spouse, counselor, etc.)

Student's	
Signature_	

Date_____

> Requests require a copy of the student's government issued ID and signature.

Please complete appropriate information, and return to the Registrar's Office by fax or mail. Registrar's Office fax number: 402-557-5498

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