Midreshet Modiin

MIDRESHET MODIIN RECOMMENDATION FORM

Please request from two Administrators or Educators to complete this form and have them send it to **baruchfelberman@gmail.com**

APPLICANT'S NAME_____

Dear Recommender: Your recommendation is highly appreciated and is an important piece of our acceptance process. Please include within your recommendation a description of the students overall academic ability and motivation, religious observance and motivation for growth, and the students interpersonal capabilities and conduct. Thank You.

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Name _____
Relationship to student_____
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School and Position_____
Phone Number _____
Times when it would be best to reach you by phone_____
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Email address_____