YESHIVAS BEIS DOVID SHLOMO ♦ שיבת בית דוד שלמה

Phone: (203) 776-9237 Fax: (203) 773-9237 P.O. Box 26005 – West Haven, CT 06516 * Email: ybds@ybdsNewHaven.org

Mesivta - 5785 / 2024-2025

TEACHER ASSESSMENT

Dear Rabbi שיחיי,	
Please fill in the information below and re	turn it to Yeshiva so that we can process the application form.
Name of Rebbi:	
Daytime phone:	_(Best time to call :)
Evening phone:	(Best time to call :)
Name of Student:	
Select the description which best describe	s the applicant:
His level in גמרא places him in the class:	He is respectful to his teachers and principals:
At the top	Always
Above average	Most of the time
Average	Some of the time
Below average	
	He is respectful to his peers:
He is diligent with his studies:	Always
Always	Most of the time
Most of the time	Some of the time
Some of the time	
	He gets along with his peers:
He completes his work and assignments:	Always
Always	Most of the time
Most of the time	Some of the time
Some of the time	
He conducts himself as befitting a Yeshiva	student:
Always	
Most of the time	
Some of the time	

The Mesivta program requires a student to spend time learning independently and/or reviewing with a Chavrusah. Please assess the applicant's ability to learn for extended periods with a Chavrusah:

He is:

Very capable and will fit right in Capable, but will have a brief period of adjustment Capable but will have a very difficult period of adjustment At present not capable.

Thank you for being so helpful. This information will be treated as confidential. If we are in need of further information, we will call the numbers you have provided.