



Yeshiva Gedola of South Bend 3207 S. High Street, South Bend, IN 46614
Phone: 574-231-5173 Fax: 574-291-0043 Email: info@ygosb.com

PRINCIPAL'S REPORT
(to be completed and returned to YGSB by principal)

Present Grade _____

Last name _____ First name _____ Middle _____

Please comment, followed by a numerical rating [0-5]:

A. Academic Achievement

B. Behavior, attitude towards study

C. Attendance, adherence to school rules

D. Character, how applicant relates to other students

Please describe any notable achievements of the applicant.

Please describe if the applicant has ever been subject to disciplinary action.

Please note any important factors that we should be aware of, such as home situation or medical/emotional/physical conditions.

Name of Principal _____ Signature of Principal _____

Name of School _____

Address _____

Phone _____ Email _____ Date _____

Please email all kodesh and secular transcripts from grades 6-8 to info@ygosb.com.



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REBBI'S REPORT
(to be completed and returned to YGSB by the Rabbi)

Last name _____ First name _____ Middle _____

Please comment, followed by a numerical rating [0-5]:

A. Academic Achievement

B. Behavior, attitude towards study

C. Attendance, adherence to school rules

D. Character, how applicant relates to other students

Please describe any notable achievements of the applicant.

Please describe if the applicant has ever been subject to disciplinary action.

Please note any important factors that we should be aware of, such as home situation or medical/emotional/physical conditions.

Name of Rabbi _____ Signature of Rabbi _____

Phone _____ Email _____ Date _____