

Case#750409

Neve Tzedek Rabbinical Court**בית דין נוה צדק שע"י ק"ק זרע אברהם דענווער קא. ארה"ב**

1560 Winona Court • Denver, CO 80204 • 720-904-2406 • Fax 206-984-2252 • nevetzedekcourt@gmail.com

APPLICATION FOR CONVERSION

Date of Application _____

Date Received _____

Please answer each question as fully as you can. You may use a separate sheet, if you need more space.

I. PERSONAL DATA

(01) Name (last) _____ (first) _____ (middle) _____ (maiden) _____

(02) Address _____ City _____ State _____ Zip _____

(03) Home Phone _____ Work Phone _____

(04) Age _____ Date of Birth _____ Place of Birth _____

(05) Status of Citizenship _____

(06) Marital status _____ Name of Spouse _____ Religion _____ Occupation _____

(07) Previous Marriages, if any _____

(08) Names of Children: _____ Ages: _____

(09) Occupation _____ Places of Employment _____ Dates of Employment _____ Position _____

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(10) Briefly describe your work experiences and employment preferences.

II. FAMILY BACKGROUND

(11) Father's Name age occupation marital status religion

(11a) Briefly describe how has your father influenced your life.

(12) Mother's name age occupation marital status religion

(12a) Briefly describe how has your mother influenced your life.

(13) Names and ages of siblings:

(14) What is the extent of your parents religious observance, affiliations and activities?

(15) What is your past and current relationship with your family?

(16) Briefly describe any profound childhood/adolescent experience that have impacted your life.

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III. EDUCATION

| (17) Names of Institutions | Degree/Certificate | Date |
|----------------------------|--------------------|------|
|----------------------------|--------------------|------|

(18) Detail your high school and post-high school educational experiences: your academic likes and dislikes, relationships with teachers, fellow students, etc.

IV. GENERAL

(19) What is your current religion?

(20) What are your previous religious experiences or education?
(Detail all churches or synagogues to which you have belonged.)

(21) Have you ever been involved in Messianics?

(21a) Have you ever been involved in missionary work?

(22) What are your non-academic hobbies, pastimes and interests?

(23) Have you ever been to Israel?
(please detail your thoughts and impressions)

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V. MEDICAL HISTORY

(24) Please state any medical conditions, past and present, physical and mental.

(25) Date of latest complete physical examination _____

(26) Please list any current medications.

(27) Are you currently, or have you ever been, under the care of a psychiatrist or therapist? For what reason?

VI. CONVERSION

(29) Please explain in detail the reasons for which you are considering conversion. What are your goals in becoming a Jew?

(30) Have you ever applied for conversion elsewhere?
Where and when?

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(31) How long have you been considering conversion?

(32) Explain the extent of your knowledge of Judaism?

Lists any books, website, classes on the subject of Judaism which you have read or been involved.

(33) Do you have close friendships with persons of the Jewish faith?

(34) Are you in a long-term relationship with a Jewish person?

VII. SPONSORING RABBI

Who is or will be your sponsoring Rabbi? (Will you need assistance in identifying a sponsoring Rabbi)

(35) _____

| | | |
|------|---------|--------------|
| Name | Address | Phone Number |
|------|---------|--------------|

Please provide names of two references.

(36) _____

| | | | |
|------|---------|--------------|--------------|
| Name | Address | Phone Number | Relationship |
|------|---------|--------------|--------------|

(37) _____

| | | | |
|------|---------|--------------|--------------|
| Name | Address | Phone Number | Relationship |
|------|---------|--------------|--------------|

Please return the completed forms with your (non-refundable) application fee of \$250.00 payable to Congregation Zera Abraham Bais Din Neve Tzedek. Please include two passport size photos.