



Staten Island Hebrew Academy  
 2707 Hylan Blvd  
 Staten Island, NY 10306  
 (718) 370-SIHA (7442)  
[www.sihebrewacademy.org](http://www.sihebrewacademy.org)

## **Where Rich Legacy Meets Academic Excellence**

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*Office of the Dean*

"If the statistics are right, the Jews constitute but one percent of the human race. It suggests a nebulous dim puff of star dust lost in the blaze of the Milky Way. Properly the Jew ought hardly to be heard of, but he is heard of, has always been heard of. He is as prominent on the planet as any other people, and his commercial importance is extravagantly out of proportion to the smallness of his bulk. His contributions to the world's list of great names in literature, science, art, music, finance, medicine, and abstruse learning are also away out of proportion to the weakness of his numbers. He has made a marvelous fight in the world, in all the ages; and has done it with his hands tied behind him. He could be vain of himself, and be excused for it. The Egyptian, the Babylonian, and the Persian rose, filled the planet with sound and splendor, then faded to dream-stuff and passed away; the Greek and the Roman followed, and made a vast noise, and they are gone; other peoples have sprung up and held their torch high for a time, but it burned out, and they sit in twilight now, or have vanished. The Jew saw them all, beat them all, and is now what he always was, exhibiting no decadence, no infirmities of age, no weakening of his parts, no slowing of his energies, and no dulling of his alert and aggressive mind. All things are mortal but the Jew; all other forces pass, but he remains. What is the secret of his immortality?"

- Mark Twain

In SIHA, we believe that the Answer to Mark Twain's question is rather obvious. Jewish education, coupled with an everlasting pride of our rich heritage has always served as a platform which made all accomplishments possible. Being an aware Jew is not a "certain way of life", but an ability to approach all areas of life with resolve, dignity, and responsibility. In SIHA, your child will develop a deep connection to the wellspring of knowledge that has irrigated the Jewish nation with wisdom and high moral standing for thousands of years. And once again, just like other components of SIHA, our Judaic curriculum will become one more brick in the little one's foundation for SUCCESS.

*Very Truly Yours,*

***Rabbi Uzhansky***

*Dean*

***Ensuring the Future of the Jewish People One Child at a Time***



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### ***SIHA Mission Statement***

Staten Island Hebrew Academy is revolutionizing the education of children from unaffiliated Jewish families by offering a superior academic education while bringing the children back to their Jewish roots with a deep love and appreciation of their Jewish heritage. Combining a rigorous curriculum with a rich Judaic studies program, Staten Island Hebrew Academy aims to have a lasting impact on unaffiliated families, including those from the Russian-Jewish community, by developing students of high moral character who not only are able to compete with the best and brightest in the 21st Century, but also know what it means to be Jewish, are proud of their Jewish heritage and can carry the torch of Judaism to their families and beyond. Staten Island Hebrew Academy is a successful model for making a reality the increased participation by modern Jews in Jewish life and education.

We expect all of our teachers and students to do their best in ensuring SIHA's excellence. All necessary technologically advanced and modern day researched methods of education will be used and implemented. We include extracurricular activities and trips to museums to support the optimal growth of our children. Since this is a school for the gifted and talented each child is expected to take a standardized and intelligence quota test. Our advanced curriculum, off campus trips (with parental approval), and our competitive extracurricular programs ensure our students receive the right opportunities for a successful life.

It is a premise to our Judaic belief that all people are different. We celebrate the idea of the infinite by recognizing the vast difference in all of humanity. It is the mission of SIHA to find emerging talent within all our students and nurture it to fruition. SIHA promotes and implements a "whole child" school environment. We offer differentiated instruction to develop potential skills and strengthen the areas that will require further improvement. Teachers, parents, and administrators work together as a team in molding individualized goals for each child. Each classroom and subject is taught with a multi-sensory approach.

SIHA is determined for only one result- SUCCESS! The success of your child is our singular goal, unlike our "public" counterpart whose main concern is government regulations. Your child will be our most precious gift not a number or statistic. Our cornerstone is team effort and with the help of G-D we can raise children who will be the future leaders of our community and world at large.

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***2016-2017 School Contract***

Dear New Parents,

Welcome to the Staten Island Hebrew Academy. We are pleased to enclose the registration materials for the 2016/2017 school year. **Registration materials must be returned by April 30<sup>th</sup>, 2016.** We encourage you to submit your completed forms and required checks as soon as possible to ensure your child(ren)'s placement and to avoid incurring late charges.

While you are reviewing the registration materials, we direct your attention to the following:

1. The initial payment in the amount of \$1,000.00, which includes the registration fee (\$300 per child for Kindergarten through 5<sup>th</sup> Grade) must accompany your registration contract. This amount is not refundable if your child is accepted to the school. If your child is NOT accepted, your deposit is 100% refundable.
2. Tuition rates includes the registration fee and certain other fees and charges as listed below. **Registration after April 30<sup>th</sup>, 2016 is subject to an additional \$100 registration fee per child in all grades.**
3. Child(ren) will not be considered registered for the 2016/2017 school year unless the Initial Payment and the late registration fee (if applicable) are paid, and all required forms and checks for tuition and transportation are in by June 30<sup>th</sup>, 2016.
4. There is a tuition discount if you have more than one child registered in Kindergarten through Fourth grade. A schedule is attached which explains the multiple child discount. Tuition assistance is available on a limited basis if you qualify. Please contact the Financial Office for tuition assistance forms.
5. For Kindergarten, children must be five years old by December 31, 2015.
6. Child(ren) will not be allowed to start school without the immunization form. The form can be downloaded from this website directly [www.nyc.gov/html/doh/downloads/pdf/hcp/hcp-ch205.pdf](http://www.nyc.gov/html/doh/downloads/pdf/hcp/hcp-ch205.pdf)

Thank you for selecting the Staten Island Hebrew Academy. If you have any questions, please contact the school office at 718-370-7442. We look forward to serving your children's educational needs.

*Sincerely yours,*

***Rabbi Shlomo Uzhansky***  
***Dean***

On the contract, please list all students who will be attending Staten Island Hebrew Academy for the 2016-2017 school year.

If you need additional registration forms for new students, please call the school office at 718.370.SIHA (7442) and we will be glad to send them to you.

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## ***TUITION and FEES***

**KINDERGARTEN - 6**

**\$ 10,000**

**\* Tuition fees include:**

- Non-refundable registration fee (\$300 per child)
- \$300 Book Fee
- Any other fees, charges, or assessments (trips and hot lunches are not included)

### **MULTIPLE CHILD TUITION DISCOUNT\*\***

<b><u>Number of Children</u></b>	<b><u>Tuition Discount Per Family***</u></b>
2	\$500
3	\$700
4 or more	\$1,150

**THE ABOVE-DISCOUNTED AMOUNT APPLIES TO TOTAL TUITION CHARGED TO THE FAMILY BASED ON ALL CHILDREN WHO ATTEND SIHA.**

### **PTA DUES**

**\$250.00** per family

On or before the first day of school in September 2016, payable to SIHA PTA, must be remitted and paid. The PTA dues include the following:

- Mandatory lice checks throughout the year
- Teacher's gifts four (4) times throughout the year – Hanukkah, Shlachmanot for Purim, Passover, end of the year
- Contribution towards certain events and/or parties throughout the year
- Increasing SIHA library
- Various classroom purchases, such as rug for Kindergarten, shelves, storage bins, etc
- Food for in-staff training days throughout the year sponsored by the PTA

### **BUILDING AND SECURITY FUND**

**\$500.00** per family

Each family with a child in K Grade or above will be obligated to pay towards the school's building and security fund.

The payment is due July 1, 2016

### **TRANSPORTATION**

Transportation is provided by Pioneer Bus Company.

Door-door transportation can be arranged privately.

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**SCHOOL CONTRACT – 2016/2017 SCHOOL YEAR**  
**[PLEASE READ THIS ENTIRE CONTRACT CAREFULLY]**

**Parent's Name**

Last

Father

Mother

Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Child's Name & Gender (M/F)

Birth date

Grade as of September 2016

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**A. TUITION – Method of Payment** – All checks (other than registration check) must be received by the school office by **July 30th, 2016**.

I agree to pay according to the method checked (please check all that apply):

- /\_\_\_\_\_/ \$1,000.00 due by April 30, 2016
- /\_\_\_\_\_/ Ten (10) recurring credit card payments to credit card designated below, to be charged the amount of \$900.00 per month commencing August 1, 2016 and on the first of each month thereafter to and including May 1, 2017, plus a four (4%) percent credit card processing fee
- /\_\_\_\_\_/ Ten (10) tuition checks payable on the **FIRST** day of each month beginning August 1, 2016 (this check must be received by SIHA by no later than August 15, 2016) through May 1, 2017, in the amount of \$900.00 each.
- \$500.00/per family Building and Security fund due by July 1, 2016

**\*\*\*IN THE EVENT OF ANY BOUNCED OR RETURNED CHECKS AND/OR CREDIT CARD CHARGE, AN ADDITIONAL FEE IN THE AMOUNT OF \$35.00 SHALL BE CHARGED, PER OCCURRENCE.**

**B. FEES:**

1. Additional fees may be assessed during the school year for various events, programs or items, including special classes (including resource room and enrichment); occasional trips during school hours, in which case parents will be notified in advance, and educational materials which remain the property of the child (e.g. notebooks, workbooks, newspapers and supplementary textbooks).
2. PTA dues - on or before the first day of school in September 2016, an additional fee in the amount of \$250.00 per family, payable to SIHA PTA, must be remitted and paid, which amount includes the following:
  - a. Mandatory lice checks throughout the year;
  - b. Teacher's gifts three (3) times throughout the year;
  - c. Contribution towards certain events and/or parties throughout the year;
  - d. Food for in-staff training days throughout the year for the PTA.

**C. ADDITIONAL TERMS:**

1. The school reserves the right to require parents to pay all or a portion of their tuition and/or fees in advance of the commencement of the school year.
2. The undersigned hereby enroll the child(ren) named above in the Staten Island Hebrew Academy for the 2016/2017 school year and agree (i) to pay all applicable tuition, fees, and all other charges for the entire 2016/2017 school year regardless of absences, dismissal or withdrawal from the school before the end of the school year, and (ii) that the child(ren) named above may not attend classes or school functions unless (1) all such tuition, fees and other charges are paid in full when due and (2) parent(s) and/or child(ren) are in compliance with the Staten Island Hebrew Academy's rules and requirements. In no event will grades, report cards, transcripts or other school records be released until all tuition, fees and other charges have been paid in full.
3. Staten Island Hebrew Academy reserves the right to photograph or videotape students, parents, faculty and attendees at school events and use or reproduce these photographs and/or video for display, recordkeeping and promotional purposes electronically or otherwise, including, without limitation, posting or uploading to the school's internet website.

**YOUR PAYMENT OF TUITION AND FEES IS CONSIDERED YOUR ACCEPTANCE AND AGREEMENT OF THIS CONTRACT.**

Signature of Both Parents

Date

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**TRIP PERMISSION FORM**

**2016/2017 School Year**

Over the course of the school year, classes will be participating in various educational class trips. While you will be notified of the plans for each individual trip, it is the school's custom to have a yearly general permission slip on file for your child. (Note: You may not be contacted prior to a class going on a neighborhood walking trip.)

Please indicate your permission in the appropriate space below for trips occurring in the 2016/2017 school year.

In addition, we request that parents sign below indicating their knowledge of the regulation that no child is to change their bus assignment (even for one trip).

Thank you for your cooperation.

1. I hereby give my child \_\_\_\_\_ in grade \_\_\_\_\_ my permission to participate in all class trips during the 2016/2017 school year. I reserve the right to withdraw this permission only by notifying the school in writing in advance of a trip.
2. I hereby recognize the regulation that my child is not to change his/her bus assignment. I will make the appropriate arrangement for my child should alternate transportation become necessary.

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent's Signature

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**Record Release Form-FORM B**

As a Parent(s)/Guardian(s) of

Name of applicant: \_\_\_\_\_

I hereby authorize the release of any and all records, regarding of the above mentioned student to Staten Island Hebrew Academy.

Current School Name \_\_\_\_\_

School Address \_\_\_\_\_

Street City State Zip \_\_\_\_\_

School Phone Number \_\_\_\_\_ School Website \_\_\_\_\_

Records to be included for applicants for grades Pre-Kindergarten through 6<sup>th</sup> Grade are:

Academic Records

Standardized Testing Examination Scores, etc.

Attendance Records

Health Records

Evaluations and/or IEPs (if applicable)

Please send all records for the above named student to:

**Staten Island Hebrew Academy**  
 2707 Hylan Blvd  
 Staten Island, NY 10306  
[info@statenislandhebrewacademy.org](mailto:info@statenislandhebrewacademy.org)  
 Tel: 718.370.SIHA (7442)  
 Fax: 718.698.1059

**Please send records promptly to help us expedite the admissions process.  
 Thank you.**

Signature of Parent(s) or Guardian : \_\_\_\_\_

Date: \_\_\_\_\_



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**Emergency Contact Form**

Last Name		First	M.I.	Date												
Male/Female	Date of Birth		Place of Birth:													
Street Address		Apartment/Unit #														
City		State	ZIP													
<b>Father's Information/Male Guardian</b>																
Full Name of Father/Male Guardian:																
Residence Address:		Name of Employment:														
Address of Employment		Work Phone:														
Telephone:		Email:														
Best number to be reached at:																
<b>Mother's Information/Female Guardian:</b>																
Full Name of Mother/Female Guardian:																
Residence Address:		Name of Employment:														
Address of Employment		Work Phone:														
Telephone:		Email:														
Best number to be reached at:																
<b>If school cannot get in touch with either of the above, name a friend or relative who may be called upon if the child is sick in school:</b>																
<table border="1"> <thead> <tr> <th>Name</th> <th>Address</th> <th>Phone</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>					Name	Address	Phone									
Name	Address	Phone														
<b>If none of the above can be reached by phone, WHAT DO YOU WISH THE SCHOOL TO DO in case the child is sick or injured?</b> <b>(It is understood that in the final disposition of an emergency case, the judgment of the school authorities will prevail. The recommendation of the parent as indicated above will be respected as far as possible.)</b>																
<p><i>If at any time the above information must be changed, I will notify the Principal in writing.</i></p> <p style="text-align: right;">       _____        Signature of Parent or Guardian     </p> <p style="text-align: right;">       _____        Date     </p>																





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**PHOTO AND VIDEO RELEASE**

**2016/2017 School Year**

For good and valuable consideration the receipt of which is hereby acknowledged, the undersigned hereby gives and grants to the Staten Island Hebrew Academy (the "School"), its licensees, agents, successors, assigns, officers, directors, trustees and employees (collectively, the "Grantees"), the right and license to use, publish and copyright my and/or my minor child's voice, picture, likeness, or photograph(s), including negatives and finished product, either alone or accompanied by other material, in any manner and in any media for the purpose of advertising, promoting and publicizing the School. It is understood that materials may appear on the Internet.

I hereby agree that the School is not required to make use of any of the rights granted herein. I further waive all my rights to inspect and approve any finished materials and agree that the School shall be without liability to me and/or my minor child for any distortion or illusionary effect resulting from the publication of my and/or my minor child's voice, picture, likeness or photograph(s). I also waive the right to receive any payment for signing this release and waive the right to receive any payment for the School's use of any of the material described herein.

I represent and warrant that I am over 18 years of age and have the right to make this agreement. If signing on behalf of a minor I represent and warrant that I am the parent/guardian of the minor named below and have the right to execute this Release on his/her behalf. I represent that I have read the foregoing and fully understand its contents.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

If Release is on behalf of a Minor:

Minor Name: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Print Name of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

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