



Beth Tfiloh Dahan Community School /admission@bethfiloh.com / 410.486.1905

Name of Applicant: _____ Applying to Grade: _____

Current School: _____

Address of Current School: _____

School Phone Number: _____ School Fax Number: _____

Principal: _____

To Principal of Current School:

Please complete the attached Common Referral Form(s) and return to the Beth Tfiloh Dahan Community School Office of Admission along with the following information:

- 1 Report card for the current academic year
- 2 Final report card from the previous academic year
- 3 Standardized test scores
- 4 Any other pertinent information

Please be assured that all information will be held in strict confidence. Your comments will help us to evaluate the applicant's qualifications for admission to our dual curriculum program. If you have any questions, please call the Admissions Office at 410.486.1905, or email admission@btfiloh.org.

Thank you for your assistance.

Beth Tfiloh Dahan Community School
Admission Office

To Be Completed by Parent/Guardian:

I authorize Beth Tfiloh Dahan Community School to obtain educational records and any other relevant material about the above named applicant's academic, social, and emotional development from the school she/he is currently attending. **I authorize Beth Tfiloh to visit and observe the applicant at her/his current school.** I understand that this information will be considered confidential and will be used by proper authorities of Beth Tfiloh Dahan Community School for admission purposes only.

Parent/Guardian Signature: _____ Date: _____

Please return all information to: Director of Admission
Beth Tfiloh Dahan Community School
3300 Old Court Road
Baltimore, MD 21208