

Chavrusa Application Form

It is most preferable to fill out this form on our website at:
www.yagdiltorah.org/chavrusa

If you cannot fill out the form online please mail it or drop it off at the address on the right.



Yagdil Torah
 383 Kingston Ave. Room 188
 Brooklyn, NY 11213
 Phone: 347.223.5943
www.yagdiltorah.org

Here is how the Chavrusa Program works:

- A)** You fill out the following form requesting a chavrusa with your preferences..
- B)** When we receive your form we will post it on the website (minus personal information) for others to view. It will be listed on www.yagdiltorah.org/chavrusa. If they are interested they will contact us to connect with you.
- C)** View other entries listed on the above web page and notify us which ones you are interested in. It is suggested that you check back once a week for new entries. You can sort the list to view the most recent entries by clicking on "Updated".

The Chavrusa program is quick, easy and effective. If you are not happy with the Chavrusa it is extremely easy to cancel it. The only prerequisites are that you are seriously interested in a Chavrusa, and that you know when, where, and what you want to learn.

Date of Application: _____

Contact Info

The contact information being requested here is only for administrative purposes. It will not be shared publicly.

First Name: _____ **Last Name:** _____
Email Address: _____ **Zip/Postal Code:** _____
Home Phone: _____ **Cell Phone:** _____

If no Cell Phone, write the Home Phone #.

Learning Info

Subject/s : _____

Language:

English Yiddish Hebrew Russian French

Style:

I can teach Equal I want to be Taught

Time & Place

Location To Learn:

Shul Home Phone See Comment

Day:

Sunday Monday Tuesday Wednesday Thursday
 Shabbos Every Day See Comment

Time:

If you are not in EST please list times in EST.
 You can enter up to 2 time ranges.

How Often: _____

Write how often you would like to learn.

Time One:	Time Two:
From time:	From time:
To time:	To time:

Comments: