



Yeshiva University

OFFICE OF THE REGISTRAR • WILF CAMPUS

500 West 185th Street, Room 114 | New York, New York 10033 | Phone 212 960 5274 | Fax 212 960 0004 | E-mail wilfregistrar@yu.edu

REQUEST FOR CHANGE OF TORAH STUDIES PROGRAM

I. TO BE FILLED OUT BY THE STUDENT

Legal Name _____, _____, _____ YU ID _____
Last First Middle Starts With # 800 or 999

Current Mailing Address _____
Number & Street or Dorm Building & Room number City State Zip

Phone Number _____

Email Address _____

I am currently enrolled in:

IBC Mechinah/JSS MYP SBMP

I would like to switch into:

IBC Mechinah/JSS MYP SBMP as of the Fall Spring 20____ semester.

I understand that the Jewish Studies requirements of Yeshiva College or Sy Syms School of Business must be met to the satisfaction of that school.

School Attending: SSSB YC Current Class: Freshman Sophomore Junior Senior

Student Signature: _____ Date: _____

Student submits form to the Dean/Administrator of entering Torah Studies Program for approval.

II. TO BE FILLED OUT BY THE DEAN/ADMINISTRATOR OF THE ENTERING TORAH STUDIES PROGRAM

Comments:

Signature, Dean/Administrator of entering Torah Studies Program: _____ Date: _____

Dean/Administrator of entering Torah Studies Program submits this form to the Office of the Registrar.

III. OFFICE OF THE REGISTRAR

Processed by: _____ HES credit: Added Dropped Date: _____

This form must be copied to the former Torah Studies Program. Sent: YES NO