



MACHAR PROGRAM APPLICATION

Applications received after the deadline will not be guaranteed a position and may be wait-listed.

Name: _____ Birthday: ____/____/____
 First Middle Last Month Day Year

Address: _____

City: _____ ST: _____ Zip: _____ Home phone: _____

Cell phone: _____ Parent phone: _____

Parents' names: _____

Macharnik e-mail address: _____

Parent contact e-mail address (es): _____

Grade in 2017-2018: _____ High School in 2017-2018: _____

School District: _____ T-shirt size (Adult): S M L XL

Please list the extracurricular activities will you be involved with in 2013-2014:

Which activities may have some conflicts with Sunday School hours? Fall, Spring or all year?

Why do you want to be a Macharnik?

What do you hope to learn from your experience as a Macharnik? If you have already been a Macharnik, please also include the most important thing you have gained from the experience.

List and tell us about your previous teaching experience. Please include previous machar assignments, babysitting and camp counselor experience with ages of children:

List and describe your Jewish educational background (youth group, camp, religious school, including number of years):

List special talents, hobbies and interests that will contribute to the classroom:

What has been your most memorable Jewish Experience? Why?

Describe a bad memory you have of religious school:

Describe a good memory you have of religious school:

**Would you like to work with and receive training to work with special needs students?
Yes _____ No _____**

Would you like to be a shadow for children with special needs? Yes _____ No _____

Describe two ways you can have a positive effect on a child's religious school experience:

- 1. _____
- 2. _____

Describe two good qualities you have observed in teachers that you wish to emulate:

- 1. _____
- 2. _____

What does being a good role model mean to you?

Please list your grade level preferences for your Machar assignment:

- 1. _____ 2. _____ 3. _____ 4. _____

Do you have any siblings attending religious school in 2015-2016? _____

Please list their names and grades for the 2015-2016 school year:

- 1. _____ grade _____ 2. _____ grade _____ 3. _____ grade _____

Is there any grade, teacher or Macharnik that you do not want to work with next year?

Why? _____

Check one or both of your preferences: ___ Hebrew ___ Judaica ___ Either Juniors and Seniors only: ___ Fall ___ Spring ___ Both Semesters

Machar Hours are: 8:45am - 12:00pm
 B'nai Torah hours are: 12:15pm - 1:15 pm
 1:15pm - 2:15 pm

Please return this application to:
 Religious School Director/Machar Program
 Adat Chaverim
 6300 Independence Parkway
 Plano, TX 75023



Statement of Commitment and Responsibility

Adat Chaverim is a vibrant Jewish community which provides a means towards and a context for living an active Jewish life.

The goal of the educational programs at Adat Chaverim is to develop the skills, knowledge and attitudes in our students which will enable them to participate in our Jewish community, form a strong relationship with the Jewish community and to bond with Jewish people in friendship and spirit.

As a member of our education team, you are responsible for creating the learning experiences and developing the relationship with your students which will enable them to meet our educational goals.

I promise to do my best to provide an enriching experience for the class/es to which I am assigned. I agree that my presence in each class is vital and necessary. I promise to work willingly with the classroom teacher in order to promote teamwork and a successful class. I will discuss any concerns, challenges and/or successes I have with the teacher or the Machar Coordinator.

I understand that I am required to attend Machar meetings from 12:00 – 12:45 on scheduled Sundays. I understand that if I am not registered for B'nai Torah classes, I am still expected to participate in these meetings. I will follow Religious School guidelines regarding attendance, cell phone usage and break times. I also understand that I am responsible for reading all weekly communications sent out by the Machar Coordinator. It is my responsibility to inform the Machar Coordinator of any planned or unplanned absences.

Macharnik Signature

date

Parent signature

date

Note: Electronic copies of this contract are not acceptable. Please return a hard copy to the Machar Coordinator or Religious School Director. It must be signed by *both* the Macharnik and Parent.