



**MACHAR PROGRAM APPLICATION**

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 2021-2022: \_\_\_\_\_ High School in 2021-2022: \_\_\_\_\_

School District: \_\_\_\_\_ T-shirt size (Adult): S    M    L    XL    XXL

Please list the extracurricular activities will you be involved with in 2021-2022:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Which activities may have some conflicts with Religious 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?**

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**List and tell us about your previous teaching experience if you have any. You can include Macharnik training, babysitting and camp counselor experience with ages of children:**

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

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

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**What has been your most memorable Jewish Experience? Why?**

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**Describe a bad memory you have of religious school:**

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**Describe a good memory you have of religious school:**

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**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 2021-2022? \_\_\_\_\_

Please list their names and grades for the 2021-2022 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 your preference: \_\_\_\_\_ Hebrew \_\_\_\_\_ Judaica \_\_\_\_\_ Either

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:

Valerie Klein

10395 Darkwood Drive

Frisco, Texas 75035

Or

DirectorofEducation@adatchaverim.org



**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. We are where Reform Judaism thrives.

The priority goal of Adat Chaverim Religious School is for learners to be on a life long journey of active engagement with the Jewish community; guided by the study of Torah, God and Tikkun Olam.

As a member of our education team, I understand that I am responsible for helping to create the learning experiences, positive environment and developing the relationship with my students which will enable them to meet this goal.

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, the Macharnik Coordinator or the Director of Education.

I understand that if I am unable to attend on any given Sunday, I will contact both my teacher and the Macharnik Coordinator. 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 Macharnik Coordinator.

\_\_\_\_\_  
**Macharnik Signature**

\_\_\_\_\_  
**date**

\_\_\_\_\_  
**Parent signature**

\_\_\_\_\_  
**date**