York University

Application for Certificate in Jewish Studies

| Student Number: Class: Address: | | |
|-----------------------------------|-------------------------------|--|
| Telephone: | Email: | |
| List of courses in Jewish Studies | (include credits and grades): | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Student's Signature | Date | |
|---------------------------------|----------|--|
| Program Coordinator's Signature | Date | |