

Preferred Aliyah Season:

- Summer 2010 (July - September, 2010)**
Extended Deadline: Immediately
Flight Date: Available online
- Fall 2010 (October - November, 2010)**
Deadline: August 1, 2010

Please note: Priority for funding and placement on one's flight of choice will be given to those applicants who submitted a complete application **by the initial deadline.**

Name of Applicant: _____
Last Name, First Name

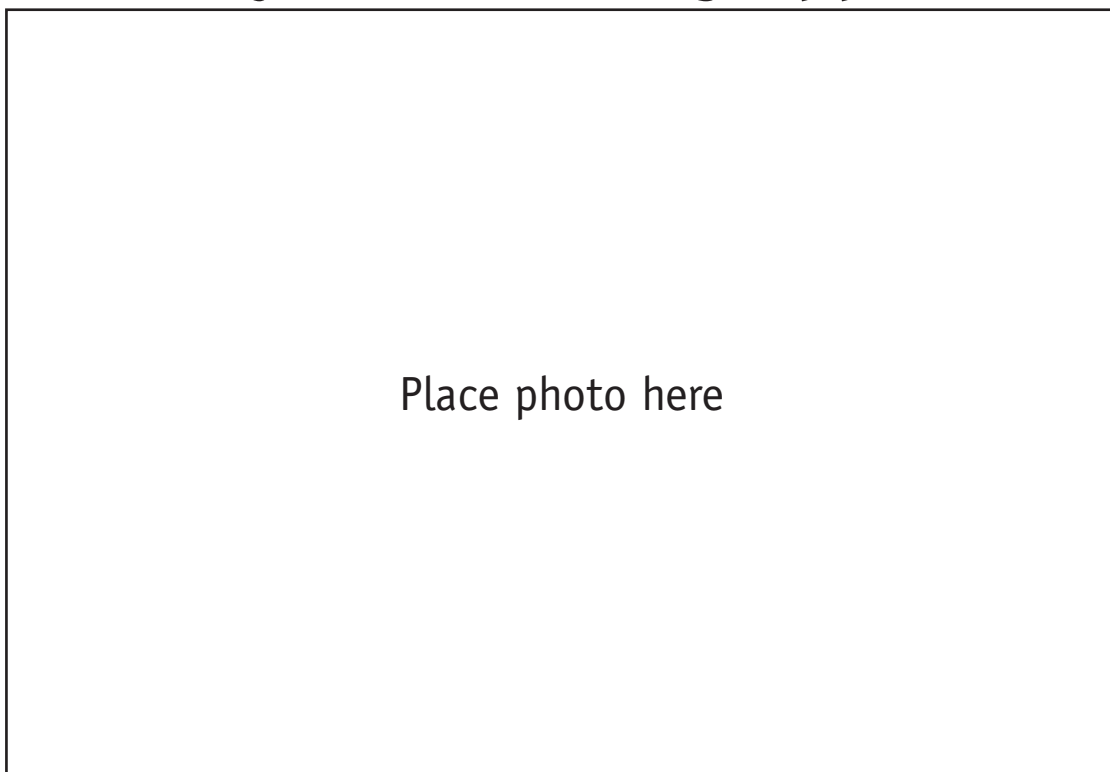
City of Residence: _____
City, State

Email Address: _____

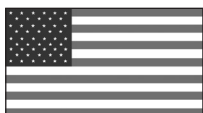

נפש Nefesh
בנפש B'Nefesh



Go North Financial Aid, Services & Aliyah Processing Application



Place photo here



Units:

Date Received:

For Internal Use Only

GN_070110

In cooperation with
 הסוכנות היהודית לארץ ישראל
Jewish Agency for Israel

For questions related to your Aliyah, please call Nefesh B'Nefesh at 1-866-4-ALIYAH.

Nefesh B'Nefesh and Go North!

Nefesh B'Nefesh aims to facilitate Aliyah by providing a financial buffer for Olim and helping supplement the requisite relocation expenses, thereby alleviating the somewhat prohibitive costs of Aliyah. In addition to providing an Aliyah grant, we offer support to our Olim both before and after their Aliyah for employment, social services and government assistance, in order to help make their Aliyah as seamless and successful as possible.

The Go North initiative is a special Nefesh B'Nefesh program that offers a unique and comprehensive array of services and support for Olim who make their permanent home in the North of Israel. Below is a brief description of the Go North Program, and the services and resources available to Go North Olim.

Participating Communities

Recognizing that not every individual is seeking the same sort of living accommodations, location, services, etc., the Go North Program offers two separate tracks. Track One is for Olim who make Aliyah to one of our pre-identified areas where they will receive local NBN support services. They will become part of a cohesive group of Nefesh B'Nefesh Go North Olim all looking to share this experience together.

Track One areas include the following:

- Maalot
- Carmiel
- Misgav Region
- Afula
- Katzrin and surrounding communities

Olim who are interested in living in the North, but do not wish to live in a Track One community, may instead opt for Track Two. As Track Two participants, they may choose to live anywhere within the parameters of the Go North program, which includes the Galilee area, the Golan Heights, the Jezreel Valley, and the Upper Jordan Valley. Note: Haifa and the Haifa suburbs (Krayot) are not included in the Go North Program.

Financial

The costs associated with pilot trips, finding a home, and purchasing and shipping household appliances and furnishings can be challenging. Often it takes several years to earn and save enough funds necessary for the move. For a family with children, by the time the requisite amount is saved, the children are invariably at an age that makes a move difficult socially, linguistically and educationally.

To obviate these fiscal obstacles, Nefesh B'Nefesh provides financial assistance for each eligible individual or family in order to enable them to make their dream of Aliyah a reality. Enhanced grants are available for eligible Go North participants, beyond what regular NBN Olim receive. In addition, Go North Olim may be eligible to receive a transportation subsidy for use in purchasing or leasing a car.

All financial assistance provided to each Aliyah candidate will be vested three years after Aliyah. If the candidate emigrates from Israel within three years, the candidate will be obligated to return the financial assistance (grant) to Nefesh B'Nefesh. If they relocate within Israel outside the Go North region, during the three-year period, they will be obligated to repay up to 50% of the Go North grant.

Pre-Aliyah

Our Pre-Aliyah Department assists Olim in all areas of Aliyah planning. Our expert Pre-Aliyah staff answer all questions regarding Aliyah such as starting the Aliyah application process, planning a pilot trip, and applying to Nefesh B'Nefesh. This department is also responsible for grant allocations and for overseeing the application review process.

Group & Charter Aliyah Flights

NBN Olim fly to Israel together on either charter or group Aliyah flights. Charter flights refer to those flights exclusively chartered for Nefesh B'Nefesh Olim, while group flights refer to a reserved block of seats on a regularly scheduled EL AL flight. Making Aliyah together with hundreds of fellow Olim not only provides an inspiring and emotional experience, but also facilitates more efficient government processing. Officials from Misrad Hapnim (Ministry of the Interior) are on board processing paperwork, saving Olim the trip to government offices upon their arrival.

Employment

Our Go North Employment Coordinator helps Olim who are seeking assistance in finding employment, job retraining, career development, or professional mentoring.

Absorption - Klita

Our Absorption Department is ready to assist Olim with questions regarding Oleh benefits, government processing, and any other aspect of their absorption.

Guidance and Community Resources

Each Track One community will be serviced by a Regional Klita Coordinator (RKC) who resides in that community. The RKC is responsible for managing all social and educational activities, and personally guiding each individual through the absorption process. The RKC liaises and advocates with local educational administrators, government offices, health care providers, non-profit organizations, and the like. Track Two participants will receive hands-on absorption assistance from the manager of the Go North Program, who will call on a regular basis, visit the communities, assist in interfacing with municipal and educational authorities, and provide region-based social and educational programming.

Online Resources

NBN Website: We are constantly updating our website with Aliyah resources, contacts and useful information and links. Find us at: www.nbn.org.il

Go North Website: The Go North website has up to date information on the program and on living in the North. Visit: www.gonorth.org.il

NBN Yahoo Group: We have set up a Yahoo discussion group for our applicants and veteran Olim for exchanging advice, contacts and community information. To sign up, email: nefeshbnefesh-subscribe@yahoogroups.com

NBN Singles Yahoo Group: There is a unique Yahoo group specifically for Single Olim: To sign up, email: nbn-singles-subscribe@yahoogroups.com

Eligibility for Financial Assistance

Please note that Nefesh B'Nefesh may at any time change the terms and conditions for Financial Eligibility. Please check our website regularly for any changes. **Please also note that all financial records are kept in utmost confidentiality.**

- Applicants for financial assistance must be residents of either the United States or of Canada.
 - Financial assistance is awarded to individuals or families based on financial need. Applicants who are assessed as having sufficient funds for Aliyah will not be awarded financial assistance. **If you are unsure as to whether or not you qualify for financial assistance, please feel free to contact the Go North Project Manager, Michele Kaplan-Green, via email (michelek@nbn.org.il) before starting the application process.**
 - Both singles and families are eligible for financial assistance.
- Applicants **must NOT have made Aliyah previously.**
 - Grants will only be awarded to applicants who have been approved for Aliyah by the Jewish Agency.
 - Applicants must be planning to make Aliyah and be prepared to participate in one of our Nefesh B'Nefesh group flights.
 - Applicants must have had prior experience in Israel and participated in a pilot trip. They should be in touch with the Go North Project Manager prior to their pilot trip and arrange an appointment with her when in Israel.

***Note:** Even if you are turned down for the Go North Program, you will still be considered for general NBN assistance.

Application Instructions: Nefesh B'Nefesh Financial Aid & Aliyah Services and Jewish Agency Aliyah Processing

Please do **not** submit your application until completing **all** the following steps.

Aliyah File

If you have already opened an Aliyah file (Tik Aliyah) with the Jewish Agency, you may complete the process with your Aliyah Shaliach through March 2009. If you plan to make Aliyah after March 2009 and your Tik Aliyah will not be approved by March, please complete the required Jewish Agency paperwork in the back of this application. If you have not yet begun the Aliyah approval process, please see the next page for further instructions.

Application

Please submit your original application and copies of all requested documents. Please retain an additional copy of all paperwork for yourself.

Application Fee

Application must be accompanied by a check or money order made payable to Nefesh B'Nefesh. Money orders must be payable in US Dollars only. **Single:** \$50 USD (\$60 CAD); **Couple or family:** \$100 USD (\$120 CAD).

If you have already paid the Jewish Agency, the above fees do not apply.

If you plan to make Aliyah through Misrad Hapnim (Ministry of Interior), the fee is 100 NIS.

Please Note: The application fee is non-refundable.

Financial Affidavit

Complete the financial affidavit (included in application). Also, your (the applicant's) signature is **required** in order to process the application.

Birth Certificates

Please submit **copies** of the birth certificates of all family members making Aliyah. The birth certificate must list your parents' names. **If you have an Israeli passport, there is no need for you to submit a copy of your birth certificate with your application.** If the birth certificate is not in **English** or **Hebrew**, please submit a copy of a notarized translation into **English** or **Hebrew** with a copy of the birth certificate.

Certificate of Marital Status

Please submit a copy of relevant documentation according to your marital status, i.e.: **civil** marriage certificate, divorce certificate, or death certificate of spouse. All civil documentation issued **after** September 1, 1988 must be submitted with accompanying apostille certification. **If the marital status certificate is not in English or Hebrew, please submit a copy of a notarized translation into English or Hebrew** with a copy of the marital status certificate.

Photo

Enclose a recent color photo of all individuals making Aliyah. **Families:** Enclose one picture which includes all family members together. **Singles:** Enclose a photo of the applicant only.

Supporting Statement

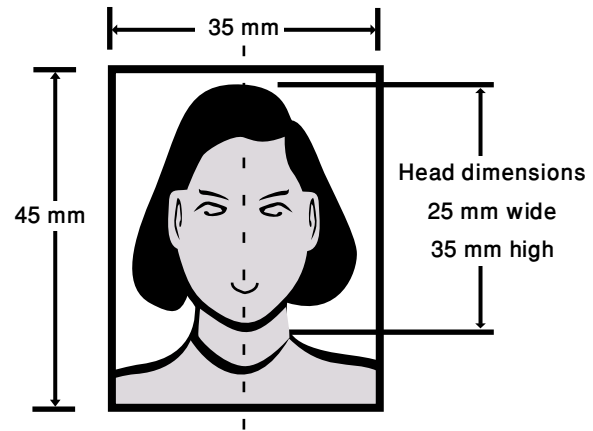
Please include any pertinent information that you believe will enhance your candidacy. Please focus as well on your specific reasons for wanting to participate in the Go North Program.

Letter of Recommendation

Please include one sealed letter of recommendation, preferably from a community leader (non-relative).

Passport Photos

Please include **three official and identical** passport photos of **each family member age 16 and above** who is making Aliyah. The photos should be in color, 35 mm wide by 45 mm high, front view, ears showing, and on a blue or white background. Please print the full name of each Oleh on the back of each photo.



Passport Photocopies

Please submit a copy of the main page of your passport (which includes your picture) and that of everyone in the family who is making Aliyah. Please include photocopies of all pages indicating applicable date extensions, and/or name changes. (If you have an Israeli passport, please submit a copy of your Israeli passport in addition to your US/Canadian passport)

Important!

Note: If one or both of your parents held Israeli citizenship at the time of your birth, you are considered by the State of Israel to be an Israeli citizen and therefore must issue an Israeli passport and **submit a copy of your Israeli passport** to Nefesh B'Nefesh in addition to your US/Canadian passport.

Note: Your US/Canadian passport **must NOT expire for at least six months** from your date of Aliyah.

Application Instructions continued on the next page ➡

Please note: Due to periodic updates, there may be more recent versions of this application available. We ask that you please download and submit the most recent version from our website: www.nbn.org.il

Application Instructions: Nefesh B’Nefesh Financial Aid & Aliyah Services and Jewish Agency Aliyah Processing (continued)

Please do **not** submit your application until completing **all** the following steps.

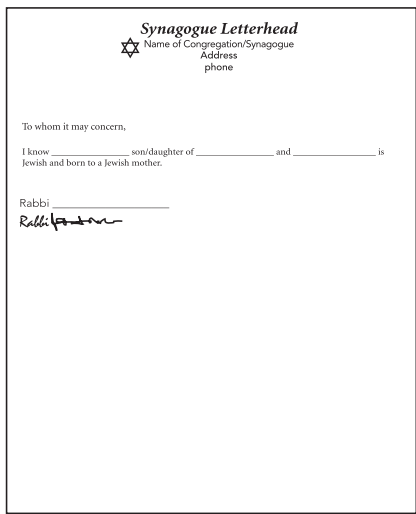
Acceptable Proof of Judaism

Please submit a *copy* of one of the following:

- 1) **Signed letter in English or Hebrew from a recognized Rabbi in North America** on official synagogue letterhead, which states the following:
 - Name, location and telephone number of congregation
 - Applicant’s full name and parents’ names
 - Applicant (and spouse, if applicable) **is Jewish and born to a Jewish mother**

If you are Jewish through your father/grandfather, please provide a letter from a recognized Rabbi in North America who can confirm your Jewish heritage.

Sample Proof of Judaism



The image shows a sample of a synagogue letterhead. At the top, it says "Synagogue Letterhead" with a Star of David icon. Below that, it lists fields for "Name of Congregation/Synagogue", "Address", and "phone". The main body of the letterhead contains the text: "To whom it may concern, I know _____ son/daughter of _____ and _____ is Jewish and born to a Jewish mother." There is a line for the Rabbi's name, which is filled in with "Rabbi: [Signature]".

- 2) **Conversion Certificate** from a recognized Beit Din (Rabbinical Court). The certificate must be signed by the three members of the officiating Beit Din.

PLEASE NOTE: If you converted to Judaism in Israel, you **MUST** process your Aliyah at the Misrad Hapnim in Israel.

In addition to your conversion certificate, please submit two accompanying letters, as follows:

- A) A letter **from the rabbi with whom you studied in preparation for your conversion**. The letter must appear on synagogue letterhead and describe the following:
 - Details of your conversion process
 - Where you studied (e.g. organization name)
 - Relevant dates
 - Community involvement
 - If you have children, indicate if they were born before or after your conversion
- B) Please submit a letter detailing your decision to convert to Judaism and your involvement in the Jewish community since the completion of your conversion process.

Jewish Agency Aliyah Processing Forms

If you have already opened a Tik Aliyah with the Jewish Agency, and you submitted the following forms to your Aliyah Shaliach, we kindly ask that you submit copies of these documents to Nefesh B’Nefesh.

Entry/Exit Form

(found at the end of this application)

Please photocopy and complete an Entry/Exit Form for each family member age 17 and above. Please be sure to include the dates of all visits to Israel in the past seven years and the relevant passport numbers. **Originals of these forms submitted to NBN will not be retained or returned to the applicant.**

Health Declaration

(found at the end of this application)

Please photocopy and complete the Health Declaration for each adult in the family making Aliyah. If you have children who are making Aliyah, please photocopy and complete the Child Health Declaration for each child in the family. You will need to provide a copy of the Health Declaration to the Israeli Consulate when you apply for your Aliyah visa. **Originals of these forms submitted to NBN will not be retained or returned to the applicant.**

Waiver of Confidentiality

(found at the end of this application)

Please read and sign the attached Waiver of Confidentiality. If you are married, your spouse’s signature is also required. *This document does not need to be notarized.*

NOTE: Please submit copies of the forms noted above, and retain the originals for your records.

Important!

Please Note: The Jewish Agency requires you to meet with a Shaliach in order to complete your Aliyah eligibility processing. You will be asked to bring the following items to the meeting: All original personal documents (such as passports and birth certificates, etc.); one copy of each of these documents; copies of the Jewish Agency forms in this application; and any additional items required by the Shaliach.

Mail your completed application to:

In North America:
Nefesh B’Nefesh
Attn: Application Department
50 Eisenhower Drive
Paramus, NJ 07652

In Israel:
Nefesh B’Nefesh
Attn: Application Department
5 Nachum Hefzadi
Jerusalem, 95484 Israel

Please note: Nefesh B’Nefesh and the Jewish Agency may ask you for additional documentation once your application is received and your Aliyah status has been determined.

1 Applicant Information

For the purposes of your Aliyah processing, please designate one adult in the family as the Primary Applicant and the second adult (where applicable) as the Secondary Applicant. Section A of this application should be filled out by the Primary Applicant and Section B by the Secondary Applicant.

A: Primary Applicant Information

Legal Name (exactly as it appears on your passport)
Last First Middle Maiden

Preferred First Name Hebrew Name Former Legal Name(s)

Occupation Gender Male Female

Date of Birth MM/DD/YYYY Marital Status Married Single Divorced Widowed Separated Engaged Jewish Affiliation Conservative Orthodox Reform Reconstructionist Unaffiliated Other

Important: Please submit a photocopy of your civil marriage, divorce or spouse's death certificate, if applicable.

Country of Birth: If **Israel**, at what age did you leave Israel?
If the former **Soviet Union** or **Eastern Bloc**, what year did you emigrate to the West?

If you or one of your parents are/were an Israeli citizen, please complete the Addendum for Israeli Citizens found at the back of this application.

Country of Citizenship Are either of your parents Israeli citizens? Father Mother Neither
Please list all countries to which you hold citizenship.

Important: If one or both of your parents held Israeli citizenship at the time of your birth, you are considered by the State of Israel to be an Israeli citizen and must obtain an Israeli passport and submit a copy of it to Nefesh B'Nefesh in addition to your US/Canadian passport.

Mother's Name Date of Birth: MM/DD/YYYY Father's Name Date of Birth: MM/DD/YYYY

Mother's Maiden Name

Contact Information

Home Phone Work Phone Mobile Phone Email Address

Current Address Address

City State/Province Postal Code Country USA Canada

B: Secondary Applicant Information (if applicable)

Legal Name (exactly as it appears on your passport)
Last First Middle Maiden

Preferred First Name Hebrew Name Former Legal Name(s)

Occupation Gender Male Female Date of Birth MM/DD/YYYY

Country of Birth: If **Israel**, at what age did you leave Israel?
If the former **Soviet Union** or **Eastern Bloc**, what year did you emigrate to the West?

If you or one of your parents are/were an Israeli citizen, please complete the Addendum for Israeli Citizens found at the back of this application.

Country of Citizenship Are either of your parents Israeli citizens? Father Mother Neither
Please list all countries to which you hold citizenship.

Important: If one or both of your parents held Israeli citizenship at the time of your birth, you are considered by the State of Israel to be an Israeli citizen and must obtain an Israeli passport and submit a copy of it to Nefesh B'Nefesh in addition to your US/Canadian passport.

Mother's Name Date of Birth: MM/DD/YYYY Father's Name Date of Birth: MM/DD/YYYY

Mother's Maiden Name

Will you be making Aliyah (obtaining Israeli citizenship) with your spouse/fiancé? Yes No

C: Children Please provide the information below, if applicable. Please enter full names, as they appear on passports.

Child 1	<input type="radio"/> Male <input type="radio"/> Female			<input type="radio"/> Yes <input type="radio"/> No
Last Name, First Name, Middle Name (as appears in passport)	Gender	DOB: MM/DD/YYYY	Country of Birth	Will this child be making Aliyah with you?
Child 2	<input type="radio"/> Male <input type="radio"/> Female			<input type="radio"/> Yes <input type="radio"/> No
Last Name, First Name, Middle Name (as appears in passport)	Gender	DOB: MM/DD/YYYY	Country of Birth	Will this child be making Aliyah with you?
Child 3	<input type="radio"/> Male <input type="radio"/> Female			<input type="radio"/> Yes <input type="radio"/> No
Last Name, First Name, Middle Name (as appears in passport)	Gender	DOB: MM/DD/YYYY	Country of Birth	Will this child be making Aliyah with you?
Child 4	<input type="radio"/> Male <input type="radio"/> Female			<input type="radio"/> Yes <input type="radio"/> No
Last Name, First Name, Middle Name (as appears in passport)	Gender	DOB: MM/DD/YYYY	Country of Birth	Will this child be making Aliyah with you?
Child 5	<input type="radio"/> Male <input type="radio"/> Female			<input type="radio"/> Yes <input type="radio"/> No
Last Name, First Name, Middle Name (as appears in passport)	Gender	DOB: MM/DD/YYYY	Country of Birth	Will this child be making Aliyah with you?
Child 6	<input type="radio"/> Male <input type="radio"/> Female			<input type="radio"/> Yes <input type="radio"/> No
Last Name, First Name, Middle Name (as appears in passport)	Gender	DOB: MM/DD/YYYY	Country of Birth	Will this child be making Aliyah with you?

Important: If one or both parents have Israeli citizenship, your children are considered by the State of Israel to be Israeli citizens. You must obtain an Israeli passport for each child and submit a copy of that passport to Nefesh B'Nefesh in addition to their US/Canadian passport.

If you or your spouse was previously married, or if you have children from a previous union, please complete this section.

Please indicate which spouse(s) were previously married: Primary Applicant Secondary Applicant

If both spouses were previously married, please answer the questions below for each spouse (use the back of this page if necessary).

Is your ex-spouse/partner an Israeli citizen? Yes No

Do you have minor children from your previous marriage/union? Yes No If yes, how many? _____

Are any of the children accompanying you on Aliyah from a previous marriage/union? Yes No

If so, please indicate which child(ren): _____

Has permission been granted for the child(ren) to move abroad by their other parent? Yes No **If so, include letter of permission.**

Were any of the minor children listed above adopted? Yes No

If yes, please list which children and dates of adoption: _____

Please confirm the total number of family members, including yourself, officially making Aliyah: _____

D: Medical History **Note:** This will not affect eligibility for acceptance to NBN, but will allow us to guide you more concretely through your Aliyah, and advise you as to parallel medications in Israel.

Are you or any members of your family experiencing (or have previously experienced) any medical, psychological or psychiatric issues? Yes No

If yes, please describe: _____

Are you or any family members applying currently taking medications for the above? Yes No

Please list who and which medications: _____

Do you or any members of your family suffer from any disabilities? Yes No If yes, who? _____

If yes, are there functional restrictions? Yes No Please describe (use back if nec.): _____

Does this disability inhibit your/your spouse's ability to acquire employment? Yes No

2 Aliyah Plans

A: Aliyah File *If you have opened an Aliyah file with the Jewish Agency, please contact our office for further clarification before completing the rest of the application. 1-866-4-ALIYAH*

Shaliach's name (if applicable) **Five-Digit Tik Number** (if applicable)

What is the status of your Tik Aliyah? Awaiting Approval Approved for Aliyah Rejected Not Yet Open

If you will be making Aliyah via Misrad Hapnim (Israeli Ministry of Interior), please check here:

B: Aliyah Planning

When are you planning to make Aliyah? June 2010 July 2010 August 2010 September 2010
 October 2010 November 2010 December 2010

Have you made a pilot trip? (A pilot trip is a fact-finding pre-Aliyah trip with the aim of researching communities, school options and job networking. Ideally the pilot trip should take place several months prior to Aliyah.) Yes No

If yes, when? Which communities did you visit?

If no, when are you going on a pilot trip?

Which northern communities are you considering living in?

Have you made living arrangements yet? Yes No

If yes, please provide details and address:

Are you interested in living in an Absorption Center? Yes No

When is the last time you were in Northern Israel? How long did you spend there?

What was the nature of your visit? Sightseeing/vacation Visiting friends and family Pilot Trip
 Business Other:

Do you have any friends/family that currently live in Northern Israel? Yes No If yes, where?

C: Aliyah Financial Planning

How much savings do you think you need to make your Aliyah a reality?
In US Dollars

How much of that sum have you amassed?
In US Dollars

Do you own a home? Yes No If yes, do you plan to rent out or sell your current home? Rent Sell

How much do you expect to net (sale price less mortgage & commissions) from the sale of your home?
In US Dollars

Do you own any other real estate (including in Israel)? Yes No Estimated Market Value:
In US Dollars

How much financial aid are you seeking?
(Family grant: maximum \$15,000 Single grant ranges from \$1,000 to \$4,000)

How would the provided financial assistance be used?

Do you have debt? Yes No

If so please list:

Please present your debt management plan:

What sources of income do you expect to have after Aliyah?

3 Personal Profile

For the purposes of your Aliyah processing, please designate one adult in the family as the Primary Applicant and the second adult (where applicable) as the Secondary Applicant. Section A of this application should be filled out by the Primary Applicant and Section B by the Secondary Applicant.

A: Primary Applicant

Name

List any Jewish groups, camps, and/or organizations you have been affiliated with:

Previous Experience in Israel

Please provide details and dates of your prior experience(s) in Israel on the lines below.

If you have participated in a MASA/Birthright program, please check here:

Please indicate if any of the following information regarding previous stays in Israel applies to you:

- I spent more than 18 months in Israel in the 3 years prior to my anticipated Aliyah date
- I spent more than 36 months in Israel in the 7 years prior to my anticipated Aliyah date
- I spent more than 5 years in Israel in the 7 years prior to my anticipated Aliyah date
- I am unsure about the length of my previous stays in Israel
- None of the above

Have you ever held an A1 Visa (Temporary Resident)? Yes No If yes, FROM TO
MM/DD/YYYY MM/DD/YYYY

If so, what is your 9-digit Israeli ID Number?

Have you ever served in the IDF or any other armed forces? None IDF Machal Other - please specify:

Important: If you are an Israeli citizen or previously held temporary resident status and your marital status has changed since you last resided in Israel, you will need to submit all relevant documents of your status changes (marriage, divorce, etc.) with apostille certification.

If you served in the IDF or Machal, what is your 9-digit Israeli ID Number? FROM TO
MM/DD/YYYY MM/DD/YYYY

Have you ever issued a Teudat Zehut booklet (Israeli ID card)? If yes, please indicate the date of issue:
MM/DD/YYYY

Are you planning to serve in the Israeli Defense Force after your Aliyah? Yes No

If you will be joining Garin Tzabar, please check here:

Jewish Lineage

Were you born to a Jewish mother? Yes No

If no, please indicate which of the following options applies to you:

- My father is/was Jewish
- One of my grandfathers is/was Jewish
- My spouse is Jewish (non-Israeli)
- None of the above

Have you converted to Judaism? Yes No If so, what was the date of your conversion?
MM/DD/YYYY

Has anyone in your family converted to Judaism? Please specify: Spouse Mother Father Daughter Son None

If so, please indicate the dates of conversion & to whom they apply:
MM/DD/YYYY

NOTE: Please submit a copy of all conversion documents with application.

Education

High School

Name of Institution City State/Province Years Attended e.g. 1987-1991 Degrees Attained

College/University

Name of Institution City State/Province Years Attended e.g. 1991-1995 Degrees Attained

Post-College

Name of Institution City State/Province Years Attended e.g. 1995-1999 Degrees Attained

Post-College

Name of Institution City State/Province Years Attended e.g. 1995-1999 Degrees Attained

Employment History

I am currently Employed Unemployed Studying Retired

Please list your last 3 jobs, beginning with the most recent:

Job 1 Company name Position Held Start Date End Date

What did you like most about this position?

What did you like least about this position?

Job 2 Company name Position Held Start Date End Date

What did you like most about this position?

What did you like least about this position?

Job 3 Company name Position Held Start Date End Date

What did you like most about this position?

What did you like least about this position?

In what profession will you seek employment in Israel? Please provide details:

At this time, have you found any employment opportunities in Israel? Yes No

If yes, please provide details:

Please rate your knowledge of Hebrew: Please circle (poor) 1 2 3 4 5 (fluent) Reading Speaking Writing

Are you planning on taking Hebrew language Ulpan? Yes No

Personal Profile

How long have you been considering making Aliyah?

What (if any) family do you have in Israel?

What (if any) other family members are considering Aliyah?

List the three main reasons for your interest in making Aliyah:

- 1.
- 2.
- 3.

What do you see as your two biggest challenges once living in Israel?

1.
2.

How would you address those challenges?

1.
2.

List any stressful events you have experienced over the past two years:

.....
.....
.....

Are you currently involved in any legal proceedings? Yes No If yes, please explain:

.....
.....

Have you ever been convicted of a felony and/or are there any outstanding warrants against you? Yes No

If yes, in which state: Please explain:

.....
.....

I declare that I have not committed any act directed against the Jewish people or the security of the State of Israel.

B: Secondary Applicant

Name

List any Jewish groups, camps, and/or organizations you have been affiliated with:

.....
.....

Previous Experience in Israel

Please provide details and dates of your prior experience(s) in Israel on the lines below.

.....
.....

If you have participated in a MASA/Birthright program, please check here:

Please indicate if any of the following information regarding previous stays in Israel applies to you:

- I spent more than 18 months in Israel in the 3 years prior to my anticipated Aliyah date
- I spent more than 36 months in Israel in the 7 years prior to my anticipated Aliyah date
- I spent more than 5 years in Israel in the 7 years prior to my anticipated Aliyah date
- I am unsure about the length of my previous stays in Israel
- None of the above

Have you ever held an A1 Visa (Temporary Resident)? Yes No If yes, FROM TO
MM/DD/YYYY MM/DD/YYYY

If so, what is your 9-digit Israeli ID Number?

Have you ever served in the IDF or any other armed forces? None IDF Machal Other - please specify:

Important: If you are an Israeli citizen or previously held temporary resident status and your marital status has changed since you last resided in Israel, you will need to submit all relevant documents of your status changes (marriage, divorce, etc.) with apostille certification.

If you served in the IDF or Machal, what is your 9-digit Israeli ID Number? _____ FROM _____ TO _____
MM/DD/YYYY MM/DD/YYYY

Have you ever issued a Teudat Zehut booklet (Israeli ID card)? _____ If yes, please indicate the date of issue: _____
MM/DD/YYYY

Are you planning to serve in the Israeli Defense Force after your Aliyah? Yes No

If you will be joining Garin Tzabar, please check here:

Jewish Lineage

Were you born to a Jewish mother? Yes No

If no, please indicate which of the following options applies to you:

- My father is/was Jewish One of my grandfathers is/was Jewish My spouse is Jewish (non-Israeli)
 None of the above

Have you converted to Judaism? Yes No If so, what was the date of your conversion? _____
MM/DD/YYYY

Has anyone in your family converted to Judaism? Please specify: Spouse Mother Father Daughter Son None

If so, please indicate the dates of conversion & to whom they apply: _____
MM/DD/YYYY

NOTE: Please submit a copy of all conversion documents with application.

Education

High School
Name of Institution _____ City _____ State/Province _____ Years Attended _____ Degrees Attained _____
e.g. 1987-1991

College/University
Name of Institution _____ City _____ State/Province _____ Years Attended _____ Degrees Attained _____
e.g. 1991-1995

Post-College
Name of Institution _____ City _____ State/Province _____ Years Attended _____ Degrees Attained _____
e.g. 1995-1999

Post-College
Name of Institution _____ City _____ State/Province _____ Years Attended _____ Degrees Attained _____
e.g. 1995-1999

Employment History

I am currently Employed Unemployed Studying Retired

Please list your last 3 jobs, beginning with the most recent:

Job 1
Company name _____ Position Held _____ Start Date _____ End Date _____
What did you like most about this position? _____ What did you like least about this position? _____

Job 2
Company name _____ Position Held _____ Start Date _____ End Date _____
What did you like most about this position? _____ What did you like least about this position? _____

Job 3
Company name _____ Position Held _____ Start Date _____ End Date _____
What did you like most about this position? _____ What did you like least about this position? _____

4

Financial Affidavit

Any information provided in this application is strictly confidential and will not be used for any reason other than determining eligibility for Nefesh B'Nefesh grants and services, or as required by law.

The amounts listed below should be in US Dollars.

Primary Applicant's full name(s) Please print

Secondary Applicant's full name(s) Please print

CURRENT INCOME

1. Total Gross Earned Income - Primary Monthly Annual \$
2. Total Gross Earned Income - Secondary Monthly Annual \$
3. Net Investment Income \$

ASSETS

4. Checking Accounts \$
5. Savings Accounts \$
6. Cash and Short Term Investments \$
7. Stocks, Options, Commodity Contracts \$
8. Value of Vehicles Owned \$
9. Retirement Funds/Pension \$
10. Loans to Others and Accounts Receivable \$
11. Value of Interest in Any Business \$
12. Do you have assets of any kind held in trust for you or any member of your immediate family? Yes No
If yes, what is the value of the trust? \$
What are the conditions for accessing that trust?
13. Do you receive any financial assistance from any person or organization (including family)? Yes No
Sources
If yes, how much? \$
Will this assistance continue after you make Aliyah? Yes No
14. Other sources of income: e.g. tax shelter investments, collections, judgements, alimony, patents, social security.
Specify type:
Annual Income Received \$

Real Estate (in North America or abroad)

15. Principal Residence - Location
Market Value \$
16. Other Real Estate - Location
Market Value \$
17. Are you renting out property? Yes No
If so, what is your rental income? Monthly Annual \$
Will this annual income continue once in Israel? Yes No
18. When making Aliyah, do you plan to sell or rent out your current home? Rent Sell

A. Total Assets \$
Figure should be the total of line items 4-8, 11, and 13-17

LIABILITIES

Current

19. Notes Payable to Banks and Others \$
20. Credit Card Balance \$
21. Other Loans \$
- Details

Long Term

22. Car Loan: Total Owed \$
23. Student and Bank Loans: Total Owed \$
24. Unpaid Taxes \$
25. Other Liabilities \$
- Details
26. Mortgage on Real Estate: Total Owed \$

B. Total Liabilities \$
Figure should be the total of line items 19 - 26

NET WORTH

Total Assets (A) \$

Total Liabilities (B) (MINUS) - \$

Your Net Worth (EQUALS) = \$

AFFIRMATION

I hereby certify that the information provided in this application is true and complete to the best of my knowledge and belief and that I will notify Nefesh B'Nefesh of any changes in the information. I hereby authorize Nefesh B'Nefesh to review and audit any and all of my financial records related to this affidavit and I hereby agree to provide any additional authorizations as required by the relevant financial institutions.

I understand that if any of the information provided in this affidavit is willfully false or incomplete, or if Nefesh B'Nefesh discovers any discrepancy between my financial records and the information provided in this affidavit, it will constitute a breach of my grant and/or services agreement with Nefesh B'Nefesh.

Primary Applicant Signature Date

Secondary Applicant Signature (if applicable) Date

Applicant(s) signature required to process application.

5 References

Please provide us with the names and contact information of people (non-relatives), in both North America and in Israel, who have known you for more than 2 years and who we can call upon as references for you. **At least one reference must be a community leader.**

Reference 1
 Name Address Phone number Reference Description

Reference 2
 Name Address Phone number Reference Description

If you are retired and have children in Israel, please list:

.....
 Name Address Phone number

.....
 Name Address Phone number

6 Supporting Statement (Required)

Instructions: On a separate piece of paper, please provide any pertinent information that you believe will enhance your candidacy. Please describe yourself and be sure to highlight your reasons for making Aliyah as well as your post-Aliyah plans. Please focus as well on your specific reasons for wanting to participate in the Go North Program.

7 Signature

I/We hereby certify that all answers which I/We have provided in this application are truthful and correct.

.....
 Primary Applicant Signature Date

.....
 Secondary Applicant Signature Date

Have you included...

- Financial Affidavit (incl. your printed name & your signature)
- Photo of all family members making Aliyah
- Application fee
- One letter of recommendation
- Supporting Statement
- Original application, including all supplementary documentation
- Three identical, official passport photos of each applicant over 16; please write name of applicant on back of each photo
- One photocopy of each applicant's passport
- Copy of certificate of civil marriage, divorce, or death, apostille certification, as applicable
- Copy of each applicant's birth certificate
- Copy of a letter from your rabbi, or conversion certificate, as applicable
- One Entry/Exit Form for each adult in your family making Aliyah
- One Health Declaration for each family member making Aliyah
- Waiver of Confidentiality

Please Note: If you were born in a country that belonged to the former Soviet Union or Eastern Bloc and emigrated to the West after January 1, 1972, please be advised that your Aliyah approval process will likely take several months. Your approval must go through special review by Lishkat Hakesher in Israel. As this process can take a few months, please plan your Aliyah accordingly. You will need to submit additional documentation including a questionnaire in Russian (if you were born in the former Soviet Union) and original documents issued by your country of birth. Please contact your local Jewish Agency Aliyah Shaliach immediately to set up an interview where you will receive this questionnaire. The Shaliach will inform you of the documents you must assemble. Your Aliyah approval process cannot begin until you have had this initial interview.

If the above applies to you, please check here

Mail your completed application to:

In North America:
 Nefesh B'Nefesh
 Attn: Go North
 Department
 50 Eisenhower Drive
 Paramus, NJ 07652

In Israel:
 Nefesh B'Nefesh
 Attn: Go North
 Department
 5 Nachum Hefzadi
 Jerusalem, 95484 Israel

Disclaimer

I, the undersigned, _____, of _____, (insert address), have read the following statement and understood it, and do hereby agree to its terms and conditions.

I understand that Nefesh B'Nefesh is a non-profit organization whose purpose is to aid and assist new immigrants who require information and assistance regarding various questions concerning their absorption in Israel.

I understand and agree that I have not, and shall not have, at any time in the future, any claims of any kind against Nefesh B'Nefesh and/or its employees individually and/or collectively, do not and shall not bear any liability, whatsoever, for any act or omission in relation to any advice given to me or any counseling services, and/or personal accompaniment which Nefesh B'Nefesh or its employees shall provide; or any advice of a general nature which Nefesh B'Nefesh or its employees shall provide me.

For the sake of clarity, I hereby declare that I know that Nefesh B'Nefesh gives only primary advice, since they are not lawyers, or customs agents or government officials. I am aware that for further advice I will need to consult with the relevant government agencies or with experts in the field. Any advice or services that Nefesh B'Nefesh may provide are at my own risk, and I hereby irrevocably relinquish any claim which I may have, or will have, at any time, in relation to any of the above.

For the purpose of assisting in my Aliyah, I understand that some of the information I have relinquished to NBN may be shared with the Jewish Agency for Israel and the Government of the State of Israel. I also agree that any pertinent Aliyah information such as Teudat Zehut (Israeli identification) numbers and Teudat Oleh (Aliyah certificate) numbers will be shared by the Government of Israel with NBN. The above information will be held in the utmost confidentiality.

As an applicant to a program receiving funding from the State of Israel, the applicant is legally entitled to appeal to the State (Vaad HaCharigim) to address any dispute the applicant may have related to the award of a financial grant provided pursuant to the program's implementation. To submit an appeal, send a sealed letter labeled "FOR VAAD HACHARIGIM" to the NBN Israel office. (Beit Ofer - 5 Nachum Hefzadi Street, Givat Shaul, Jerusalem 95484)

I have read and understood all of the contents of this disclaimer, and hereby agree to all of its terms and conditions. My signature also represents the agreement to the above of all family members in this application.

Signed: _____ Name: _____ Date: _____

Photo Release

Photos of individuals making Aliyah sponsored by Nefesh B'Nefesh will facilitate our work and continued efforts of increasing Aliyah from North America. We thank you for your cooperation.

I, the undersigned, _____, of _____ (insert address), hereby give permission for Nefesh B'Nefesh to release photographs or videos of myself or my family in promotional or press related literature.

Signed: _____ Name: _____ Date: _____

Addendum for Israeli Citizens/Children of Israeli Citizens

A: Primary Applicant

Name

Were either of your parents Israeli citizens when you were born? Father Mother Neither

Important: If one or both of your parents held Israeli citizenship at the time of your birth, you are considered by the State of Israel to be an Israeli citizen and must obtain an Israeli passport and submit a copy of it to Nefesh B'Nefesh in addition to your US/Canadian passport.

Have either of your parents made Aliyah? Mother Date MM/DD/YYYY 9-Digit Teudat Zehut No.

Father Date MM/DD/YYYY 9-Digit Teudat Zehut No.

Have you ever made Aliyah in the past? Yes No

If yes, when did you make Aliyah and when did you leave Israel? Date of arrival MM/DD/YYYY Date of departure MM/DD/YYYY

What is your Mispar Zehut (Israeli ID #)?

Have you ever issued a Teudat Zehut booklet (Israeli ID card)? Yes No If yes, please indicate the date of issue: MM/DD/YYYY

When did you last reside in Israel? From MM/YYYY To MM/YYYY

Did you or your parents renounce Israeli citizenship? Yes No

If yes, please indicate whose citizenship was renounced and when:

If you were born in Israel or lived in Israel as a child, and left Israel before your 14th birthday, please complete the section below:

Did you leave Israel with one or both of your parents? Yes No

Did you live outside of Israel for a minimum of four consecutive years between the ages of 14-18 or 13-17? Yes No

Were either of your parents employed by an Israeli entity abroad during the last five years? Yes No

B: Secondary Applicant Information (if applicable)

Name

Were either of your parents Israeli citizens when you were born? Father Mother Neither

Important: If one or both of your parents held Israeli citizenship at the time of your birth, you are considered by the State of Israel to be an Israeli citizen and must obtain an Israeli passport and submit a copy of it to Nefesh B'Nefesh in addition to your US/Canadian passport.

Have either of your parents made Aliyah? Mother Date MM/DD/YYYY 9-Digit Teudat Zehut No.

Father Date MM/DD/YYYY 9-Digit Teudat Zehut No.

Have you ever made Aliyah in the past? Yes No

If yes, when did you make Aliyah and when did you leave Israel? Date of arrival MM/DD/YYYY Date of departure MM/DD/YYYY

What is your Mispar Zehut (Israeli ID #)?

Have you ever issued a Teudat Zehut booklet (Israeli ID card)? Yes No If yes, please indicate the date of issue: MM/DD/YYYY

When did you last reside in Israel? From MM/YYYY To MM/YYYY

Did you or your parents renounce Israeli citizenship? Yes No

If yes, please indicate whose citizenship was renounced and when:

If you were born in Israel or lived in Israel as a child, and left Israel before your 14th birthday, please complete the section below:

Did you leave Israel with one or both of your parents? Yes No

Did you live outside of Israel for a minimum of four consecutive years between the ages of 14-18 or 13-17? Yes No

Were either of your parents employed by an Israeli entity abroad during the last five years? Yes No

Name of Applicant: _____
Last Name, First Name

City of Residence: _____
City, State

Email Address: _____



Application for New Immigrant/Oleh Status

Name of Applicant: _____
Last Name, First Name

City of Residence: _____
City, State

Email Address: _____

Confidential

Jewish Agency – Aliyah Department
In _____

Date: _____

Health Declaration by Aliyah Candidate

This document is to be filled out by an Aliyah candidate requesting an aliyah visa to Israel according to the Law of Return, through the Aliyah Office of the Jewish Agency

A. Personal information

Last name _____ Male ___ Female ___
First name _____
Date of birth ____ ____ ____ Approximate date of aliyah _____
day month year

B. Information on candidates' medical condition

1. Are you in good physical health and are you capable of fulfilling daily tasks independently? Yes / No
If not, please specify: _____

2. Have you suffered in the past, or are you currently suffering, from one of the following illnesses:

Epilepsy	Yes / No	Cancer	Yes / No
Asthma	Yes / No	Tuberculosis	Yes / No
Kidney failure	Yes / No	Diabetes	Yes / No
Heart disease	Yes / No	HIV	Yes / No
		HIV carrier	Yes / No

If you answered "Yes", please indicate the following:

When did you contract this illness? _____

When were you last treated for this illness/es? _____

3. Are you taking any medications: Yes / No

If so, please indicate:

1. _____	_____	_____
Name of medication	Purpose	Daily dosage
2. _____	_____	_____
Name of medication	Purpose	Daily dosage
3. _____	_____	_____
Name of medication	Purpose	Daily dosage

4. If you suffer from any disability, please indicate:

Type of disability _____

Reasons and start of disability _____

If you require ongoing medical treatment for this disability, please note the type of treatment you require _____

5. Are you currently suffering, or have you suffered in the past, from any mental illness? Yes / No
If so, please specify: Name of illness: _____
Date of last doctor's treatment for this illness _____
If you were hospitalized, date of latest hospitalization _____
6. Have you taken in the past, or are you currently taking, either occasionally or on a regular basis
- Addictive medications Yes / No
 - Drugs (of any kind) Yes / No
 - Alcohol Yes / No
- If so, indicate: Name of medication/drug _____
When did you last take it _____
7. For women:
Are you pregnant? Yes / No Estimated date of delivery _____
8. Can you endure the flight to Israel Yes / No
If necessary, please consult with your family physician.

Name of Applicant: _____
Last Name, First Name

City of Residence: _____
City, State

Email Address: _____

Confidential

For Office Use
Jewish Agency – Aliyah Department
In _____

Date: _____

Health Declaration for Minor Children
(under age 18)

This document is to be filled out by the parents of children under age 18 requesting an aliyah visa to Israel for their children according to the Law of Return, through the Aliyah Office of the Jewish Agency

A. Personal information on the minor

Last name _____

Male ___ Female ___

First name _____

Date of birth _____
day month year

Approximate date of aliyah _____

Making aliyah with parents Yes / No

If not, indicate who in Israel is responsible for the minor:

Name: _____

Address: _____

Telephone: _____

B. Information on candidate's medical condition

1. Is the child in good physical health and is s/he capable of fulfilling daily tasks independently? Yes ___ No ___

If not, please specify: _____

2. At the time of the request for aliyah, is the child:
Attending regular/special school – in what grade? _____

If the child attends special school or is in a special class, please specify:

The child is working _____

3. Has the child suffered in the past, or is s/he currently suffering, from one of the following illnesses:

Epilepsy	Yes / No
Asthma	Yes / No
Kidney failure	Yes / No
Heart disease	Yes / No

Cancer	Yes / No
Tuberculosis	Yes / No
Diabetes	Yes / No
HIV	Yes / No
HIV carrier	Yes / No

If you answered "Yes", please indicate the following:

When did s/he contract this illness? _____

When was s/he last treated for this illness/es? _____

4. Is the child taking any medications: Yes / No If so, please indicate:
- | | | | |
|----|--------------------|---------|--------------|
| 1. | _____ | _____ | _____ |
| | Name of medication | Purpose | Daily dosage |
| 2. | _____ | _____ | _____ |
| | Name of medication | Purpose | Daily dosage |
| 3. | _____ | _____ | _____ |
| | Name of medication | Purpose | Daily dosage |
5. If the child suffers from any disability, please indicate:
 Type of disability _____
 Reasons and start of disability _____
 Are there functional restrictions _____
 If your child requires ongoing medical treatment for this disability, please note the type of treatment s/he requires _____
6. Is your child currently suffering, or has s/he suffered in the past, from any mental illness? Yes / No
 If so, please specify: Name of illness: _____
 Date of last doctor's treatment for this illness _____
 If s/he was hospitalized, date of latest hospitalization _____
7. Has your child taken in the past, or is s/he currently taking, either occasionally or on a regular basis
- Addictive medications Yes / No
 - Drugs (of any kind) Yes / No
 - Alcohol Yes / No
- If so, indicate: Name of medication/drug _____
 When did s/he last take it _____
8. Can your child endure the flight to Israel Yes / No
 If necessary, please consult with your family physician.

C.

Parents' Declaration

I hereby declare that the details provided above are correct and were given with the knowledge that they will serve as a basis for considering our child's request for aliyah to Israel and as a basis for information and disposition in this regard.
 Furthermore, I am aware that this statement does not absolve me from the need to produce medical documents, from our family physician or medical institution, as requested by the Aliyah Ministry.
 I understand that I must inform the *Aliyah* office if there are any changes in my child's health before their *Aliyah*.

Father's name and signature _____
 Mother's name and signature _____

Date: _____

In the event that the child makes aliyah with only one parent, that parent shall sign himself/herself and prove that s/he has sole custody of the child, or submit to the shaliach the other parent's authorization for the child's aliyah.

Waiver of Confidentiality for Aliyah Candidate

We the undersigned, together and severally, do hereby agree and consent to the following:

Authorization of the Jewish Agency for Israel (herein: "Jewish Agency") to store all information and data received and/or obtained relating to ourselves and our minor children on the Jewish Agency secure Internet site and/or in conventional form in Jewish Agency operated offices.

The electronic and/or conventional transmission by the Jewish Agency, of information relating to ourselves and our minor children, including, but not limited to, any medical information found in the Health Declaration for Aliya Candidate and/or in the Health Declaration for Minor Children, to such government ministries, agencies, **olim association (optional, please cross out if do not agree)** and any "public body" dealing with and/or involved in our immigration to and absorption in Israel, provided that in the sole discretion of the Jewish Agency such information is required by such ministry or agency in order to process our request to immigrate/return to Israel.

Authorization of the Jewish Agency, to request and obtain any type of information, including medical information, relating to ourselves and our minor children, from any person and/or agency, including any government ministry and including the Ministry of the Interior and the Ministry of Immigrant Absorption, if such information is required by the Jewish Agency, in its sole discretion, in order to process our request to immigrate/return to Israel.

The above constitutes consent for the purposes of the Law, and subject only to the foregoing, all information to which this document relates shall be kept strictly confidential and shall be subject to the restrictions on dissemination thereof set out in the Law.

The laws of the State of Israel apply to everything that is related, associated and the result of our request to immigrate/return to Israel, to this declaration and its attached documents and/or their contents, and the courts of Israel shall have sole jurisdiction in any dispute arising there-from including matters relating to the electronic storage of information and data.

And in witness thereof we have affixed our signature:

Aliyah candidate

First and last name	Date	Place	Signature
<u>Spouse</u>			

First and last name	Date	Place	Signature
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Affirmation of signature

I, the undersigned, do hereby affirm that _____ appeared before me, and after proving their identity to me and after assuring me they fully understood the contents of the documents, did sign in my presence.

First and last name	Date	Place	Signature
---------------------	------	-------	-----------