



Office of the Registrar
160 Herrick Road, Newton Centre, MA 02459
617-559-8642 (phone) 617-559-8825 (fax)

RABBINIC SCHOOL
PETITION TO ADD SPECIALIZATION
TO DEGREE PROGRAM

Date: _____ Student ID # _____

Legal Name (last, First, MI) _____

Current Degree Program: Masters of Arts in Jewish Studies—Rabbinic (MJSR)
 Masters of Jewish Education—Rabbinic (MJER)
 Rav/Hazzan Program: MA in Jewish Studies (MJSRK)

Specialization I would like to pursue in addition to Master’s degree checked above:

- Halakha
- Hasidut and Kabbalah
- Pastoral Care
- Spirituality & Social Justice Leadership

Student’s Signature _____

Advisor’s name: _____

Advisor’s Signature _____

Approved Yes No

Date: _____

Return this form to the Registrar’s office

Form given to Rabbinic School: _____

Approved Yes No

Approved by _____

Approval Signature: _____

Date: _____

Return this form to the Registrar’s Office.

Received by Registrar’s Office: _____

Effective date of change: Term _____ Year _____

Entered on _____