

בית דין צדק דק"ק סידני והמדינה

Sydney Beth Din**Jewish Ecclesiastical Court**

25 O'Brien Street Bondi Beach NSW 2026

JEWISH STATUS CERTIFICATION FORM**APPLICANTS INFORMATION**

Surname: _____ First Name: _____

Middle Name: _____ Hebrew name: _____

Current Address: _____

_____ State: _____ Country: _____

Phone number (mobile): _____ Email: _____

Date of Birth (dd/mm/yyyy): _____ Birthplace (town): _____ Birthplace (Country): _____

Are you a Kohen Levi YisroelHave any relatives previously applied for status or marriage registration at the Sydney Beth Din or other Beth Din Yes No Details _____

Are you the adopted / natural / Assisted Reproductive Tech child of your parents _____

_____ Date of adoption (if applicable): _____

Were you born of (both) of your parents' first marriage? _____

Have you or either of your parents converted to Judasim? Yes No

If yes, please give details (who / date / location) _____

Were any of your grandparents / great-grandparents converted to Judasim? Yes No

If yes, please give details (who / date / location) _____

MATERNAL FAMILY INFORMATION

Mother's name (English): _____ Maiden name: _____

Mother's name (Hebrew): _____ Place of Birth: _____

Is your mother the daughter of a Kohen Levi Yisroel Is your mother living? Yes No

Maternal Grandmother's name (English): _____

Maternal Grandmother's name (Hebrew): _____ Place of Birth: _____

Maternal Grandfather's name (English): _____

Maternal Grandfather's name (Hebrew): _____ Place of Birth: _____

Maternal Great-Grandmother's name (English): _____

Maternal Great-Grandmother's name (Hebrew): _____ Place of Birth: _____

ADMIN USE ONLY:

Date: _____ Status: _____ Rabbi's Signature: _____

Only valid
with Beth
Din seal

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PATERNAL FAMILY INFORMATION

Father's name (English): _____

Father's name (Hebrew): _____ Place of Birth: _____

Is your father a Kohen Levi Yisroel Is your father living? Yes No

Paternal Grandfather's name (English): _____

Paternal Grandfather's name (Hebrew): _____ Place of Birth: _____

Paternal Grandmother's name (English): _____

Paternal Grandmother's name (Hebrew): _____ Place of Birth: _____

Paternal Great-Grandmother's name (English): _____

Paternal Great-Grandmother's name (Hebrew): _____ Place of Birth: _____

FAMILY INFORMATION

Parents' marriage date: _____ Officiating Rabbi: _____

Name of Synagogue where parents were married: _____

City: _____ Country: _____

Prior to your birth, had either of your parents had a marriage annulled or been divorced ?

 Yes NoHad either of your grandmother's been divorced ? Yes No**MARITAL STATUS**Current Status: Never Married Married Divorced Widow

If the above answer was Married / Divorced / Widow – please provide the following information:

Date of marriage: _____ Officiating Rabbi: _____

Name of Synagogue: _____ City: _____

Country: _____

If the marriage has been dissolved – please provide details: _____

Reason for Jewish Status Certification (Aliyah / school etc) : _____

DECLARATION

I hereby declare that all the information provided above is true and correct, to the best of my knowledge.

Signature _____ Date: _____

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JEWISH STATUS WITNESS FORM

WITNESS ONE

This Is To Certify That I Know

(applicants name) _____

AND I CAN CONFIRM THAT TO THE BEST OF MY KNOWLEDGE THE ABOVE MENTIONED IS: (choose ONE)

- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion)
- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion) AND has never been married
- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion) AND has been married, BUT is now divorced
- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion) AND has been married, BUT is now widowed

SIGNED _____ DATE: _____

NAME (Please print): _____ CONTACT NUMBER: _____

DRIVERS LICENCE No.: _____ (Please attach colour copy)

WITNESS TWO

This Is To Certify That I Know

(applicants name) _____

AND I CAN CONFIRM THAT TO THE BEST OF MY KNOWLEDGE THE ABOVE MENTIONED IS: (choose ONE)

- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion)
- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion) AND has never been married
- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion) AND has been married, BUT is now divorced
- Halachically Jewish (mother is natural Jewess by birth / orthodox conversion) AND has been married, BUT is now widowed

SIGNED _____ DATE: _____

NAME (Please print): _____ CONTACT NUMBER: _____

DRIVERS LICENCE No.: _____ (Please attach colour copy)

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JEWISH STATUS DOCUMENT CHECKLIST

Please make sure all the documentation is emailed through in a clear, readable format so the Rabbis can see all the necessary information.

- Copy of your Birth Certificate (please make sure this has your parents name on it)
- Copy of Mother's Birth Certificate
- Parent's Ketubah
- Parent's Marriage Certificate
- In case of 2nd + Marriage – GETT Certificate or Death Certificate
- Signed Confirmation of Jewish Status Witness Form by 2 x Jewish People (not related to you and not related to each other)
- Colour copy of Witnesses Driver's Licenses
- Colour copy of your Passport and Driver's License
- Payment of AU\$180 (for Australian applicants) or **US\$360 (for Overseas applicants)**

Payment can be made via credit card or bank transfer: Acct name: Sydney Beth Din
BSB: 032-050
Acct Number: 399212

Once you have completed the application form and got the requested documentation, please email everything through to forms@bethdin.org.au.

Please Make Sure That This Checklist Is Complete, So There Are No Unnecessary Delays.