Qalam Academy Application Form WEEKEND MADRASAH

<u>ALL</u> parts of this form must be completed by applicants. Failure to do so will result in the application not being processed.

Please ensure all details are precise and correctly spelt.																
Pupil Details																
First name/s:	5				Surname:											
Date of birth:	Cui					Curre	nt Age	e:			Sex					
Place of birth:	Natio					Natior	nality:									
Full Address:																
•							F	Post	code :							
Tel (home):								-	Tel (work):						
Email:									·							
Fathers name	:								Mobile :							
Mothers name	:								Mob	ile :						
Name of sibling already at the Madrasah:																
Sat & Sun 10am - 11:40 Sunday Pre Madrasah 11						11:45	āam	- 1:3	0pm	Hifd	h 11	lam -	1:30pm			
Emergency Contact (must be different from above)																
Full Name :			•											<u> </u>		
Relationship to applicant																
Address																
									Post co	de :						
Tel (home) :						Mol	bile	:								
	•	D.				dua	b	الما		4:	- /if -	m ()				
				ous	S IVI 8	lara	san	Eau	ıca	tioi	n (if a	ny)				
Name of Madrasah/school:																
Address:																
Post code:								el:								
Length of stay: year/s months																
How many parts of Quran/Qaidah completed?																
Can applicant pray Salah? Reason for leaving current Madrasah?																
Current School Details																
Name of school																
Address (road	& are	a will s	suffic	œ)												

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	mile Background								
	Arab	Pakistani							
Disease colored the surrous and the surrous	Afghan	Somali							
Please select the group which best represents your ethnic background.	West African	Indian							
represents your ettinic background.	Bangladeshi	Kurdish							
	Other (please state):								
Health & Medical Conditions									
Does your child have any allergies or	medical conditions?								
Does your child have any special educational needs?									
Gp name & address									
Other Information									
If there is any other information which you think is relevant for the progress of your child, please									
state, e.g. applicant is an orphan, parents are separated.									
	Declaration								
I will adhere by the Madrasah rules including (but not limited to):									
1 I will send my child to the Madrasah every day and will drop & collect my child on time.									
2 I will park in a legal & safe place and will not park in front of the Masjid on double yellow									
lines									
3 I will ensure that fee payments are paid on time, either full or in 2 installments as detailed									
on the student fee slip.	n uniform & my child`s haircu	it is according to Islamic							
4 I will ensure my child is dressed in uniform & my child`s haircut is according to Islamic etiquettes									
5 I indemnify the Madrasah against any injuries, harm, damages & claims during my child's									
attendance.									
6 All concerns and complaints will be made directly to the head teacher & I will not approach									
or reprimand any member of staff. I fully understand that not complying with the above rules and those attached with this application form									
will result in the discontinuation of my child's studies at Qalam Academy.									
I confirm that the information provided is correct to the best of my knowledge.									
Ciarra atrices	Deta								
Signature :									
Relationship to applicant :									
Official Llos Only									
Official Use Only									
Date application received :	Received by:								
Date of admission :									
Fee slip given to parent/guardian/child :									