Al Qalam Academy Application Form

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

	Ple	ease ens	ure a	all deta	ails are	e pre	cise	and	d corr	rectly sr	elt.	
					upil	•						
First name/s:	<u> </u>					name	:					
Date of birth:						Current Age:				Sex		
Place of birth:						onalit					<u> </u>	
Full Address:					ı			l .				
1									Post	code :		
Tel (home):						Tel (work):			•	
Mobile :	1						il:					
Fathers name	:											
Mothers name	e :											
Name of sibling already at the Madrasah:												
Session 1 (4.20 - 5.50pm) Session 2 (6.00						7.3	7.30pm) Hifz (5.00 - 7.5			0 - 7.30pm		
Emergency Contact (must be different from above)												
		ergency		mac	L (IIIU	31 00	- un	1010	5 111 11	UIII ab	000)	
Full Name :												
Relationship to applicant Address												
Address												
									Post	code :		
Tel (home) :	T					l M	lobile	• :	1 001		1	
101 (1101110) :	ionie, .						.00					
		Previ	ous	Mad	rasal	h Ec	luca	atio	n (if	any)		
Name of Mad	rasah	/school:										
Address:	_											
Post code:						Tel:						
Length of stay	' :					year/s						months
How many parts of Quran/Qaidah completed?												
Can applicant pray Salah?												
Reason for lea	aving	current M	adras	sah?								
Current School Details												
Name of scho	ol:											
Address (road & area will suffice)												
Ethnic Background												

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Please select the group which best represents your ethnic background.	West African		Afghan					
represents your curille baokground.	Arab		English					
	Other (please state):							
		J*1*						
	Medical Cor	aitions						
Does your child have any allergies or med	lical conditions?							
Does your child have any special education	onal needs?							
Gp name & address								
	er 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.								
state, e.g. applicant is an orpinan, parents	are separateu.							
	Declaration							
I will adhere by the Madrasah rules includ	ing (but not limite	d 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 Mas	sjid on double yello)W				
lines 3 I will ensure that fee payments are payments are payments.	aid in full & on tin	ne, either quarte	erly or in 11					
installments at the beginning of eac		·	-					
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 n	nade directly to th	ne head teache	r & I will not appro-	ach				
or reprimand any member of staff.								
I fully understand that not complying with the will result in the discontinuation of my child's s			h this application for	m				
I confirm that the information provided is o								
Toomin that the information provided is c	correct to the bes	t of fifty knowled						
Signature :		Date :						
Relationship to applicant :								
Offi	cial Use On	ly						
Date application received :	Rece	eived by:						
Date of admission :		1						
Fee slip given to parent/guardian/child:								