

Pupil Admission Form

Pupil Surname: Pupil First Names:

Date of Birth: Nationality:

Religion: First Language:

Country of Birth: Proposed Term and Year of Entry:

Have you registered your child's name at any other school/s and if so, which?

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Name and address of current school:

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Father's Title: Full Names:

Address (including postcode):

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Occupation:

Telephone: Home: Mobile:

Email address:

Mother's Title: Full Names:

Address (including postcode): if different from above

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Occupation:

Telephone: Home: Mobile:

Email address:

Are parents of the above-named pupil members of Masjide Noorul Islam or Madressah Noorul Islam?

Yes [] No []

Registration Form Continued.

Doctor's Name & Surgery registered with:

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Any known medical conditions:

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Do both parents have parental responsibility for the child? ☐ Yes ☐ No

(If no, please provide details of carer/guardian).

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Is there anyone else whose consent to the child coming to the school is required? *(If Yes, please give details in a covering letter).* ☐ Yes ☐ No

Is it proposed that anyone other than the parents will pay or guarantee payment of fees? *(If Yes, please give details in a covering letter).* ☐ Yes ☐ No

Emergency Contact 1:

Full name: Relationship to child:

Address:

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Telephone Number:

Emergency Contact 2:

Full name: Relationship to child:

Address:

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Telephone Number:

Please say how you first heard of the school:

Local	<input type="checkbox"/>	Friends	<input type="checkbox"/>	Other	<input type="checkbox"/>
Website	<input type="checkbox"/>	Present school	<input type="checkbox"/>	

Notes

Early registration is recommended. Registrations will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the school at the time offers are made. Please refer to the Admissions Policy on the school website.

Please provide a copy of the child's full birth certificate and a previous school report.

Declaration

I/We request that the name of our above-named child be registered as a prospective pupil. The non-returnable registration fee of £30.00 can be paid by either cash payment at the school or a direct bank transfer:

Account name: Al Islah Schools Trust

Sort Code: 40 – 12 - 04

Account Number: 8178 3122

Reference: Full name of student

I/We understand that the Terms and Conditions of the School will undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with the school.

I/We understand also that the school (through the Head, as the person responsible) may obtain, process and hold personal information about our child, including sensitive information such as medical details, and we consent to this for the purposes of assessment and, if a place is later offered, in order to safeguard and promote the welfare of the child.

DATA PROTECTION

At Al Islah we look after your personal information and only use your personal information for the purpose for which it has been collected. If you would like further information about how and why we use your personal information, please see our privacy notices; these are available from our website: www.alislah.org.uk

Name of Parent:

Signature: Date:

For Office Use Only:

Admission Fee:

Member / Non-Member (Please circle)

Date payment of £30 received:

Uniform:

Blazer Size: £

Skirt Size: £

Scarf Size: £

Total Cost £

Customer Copy

Uniform:

Blazer Size: £

Skirt Size: £

Scarf Size: £

Total Cost £

Date: Admin Sign:

Please pay the uniform cost within 7 working days.