



Year 7 Application Form

Academic Year 2010 - 2011

Please note the following:

- 1) You must use blue or black ink and BLOCK CAPITALS to fill this form.
- 2) All sections must be completed to avoid any delay in registration.
- 3) The Application form must be signed by Parent/Guardian.
- 4) The Application form must reach the Azhar Academy Girls School office by January 2011 so that we can process your Application Form.
- 5) Please ensure that the Pupil Information Form is completed by your daughter's current teacher and returned with this Application Form.
- 6) Please ensure that the Entrance Test Fee of £30 is enclosed with this application.

PERSONAL INFORMATION:

First Name Middle Name Surname

Full Address

.....

.....

..... Post Code

Telephone Email

Date of Birth..... Age

Ethnic Background Nationality.....

Religion Sect

Medical History (is the child taking any medication)

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.....

.....

Does the pupil have a sibling currently attending Azhar Academy? If yes, Name.....

Year.....

PREVIOUS EDUCATION:

School Attending

Address

.....

.....

Telephone Year in School

Head Teacher Form / Class Teacher

Madrasah Attending

Address

.....

.....

Teacher Head Teacher

PARENT INFORMATION:

Name of Father (Guardian)

Full Address

.....

.....

Telephone E-mail Address
Religion Sect
Occupation.....
Work Telephone Mobile

Name of Mother (Guardian)
Full Address (if different to above)
.....
.....

Telephone E-mail Address
Religion Sect
Occupation.....
Work Telephone Mobile

EMERGENCY CONTACT:

Title: Mr/Miss/Mrs
First Name Second Name
Full Address.....
.....
.....
Telephone Mobile
Relationship with child

AGREEMENT

1. All children must adhere strictly to *Shariah*.
2. I agree not to interfere with the conducting of the School.
3. I agree not to approach or intimidate the class teacher.
4. I agree to hold myself responsible for any damages or injuries that may be caused by my child.
5. I agree to pay for the registration fee and the annual School fees of the child on the due dates.
6. I indemnify the Azhar Academy Girls School against any damages, injuries etc., during the child's attendance at the School.
7. I fully agree that my child will be subjected to, and I will fully comply with, the rules and regulations of the Azhar Academy Girls School.
8. I confirm that the information given above is correct.

DECLARATION BY PARENT / GUARDIAN :

Full Name: Signature:
Relationship with Child : Date:

OFFICE USE ONLY

Admission Date: Student No.:

School Registration Fees: (£500)

SCHOOL FEES PAYMENT OPTION

Option A (Paid in Full - £2400)

Option B (Termly - £800 per term)

Option C (Monthly - £240 per month) Standing Order

NOTES