

Al-Ameen Preschool

Unit1 Quebec Wharf

14 Thomas Road

London, E14 7AF

Tel: 020 3441 9988

Fax: 087 1661 3370

Email: mail@eastlondonislamicschool.co.uk

Website: www.eastlondonislamicschool.co.uk



APPLICATION FORM FOR ADMISSION

1. Pupil Details:

Pupil's Surname

First Name

(Please underline the preferred name by which the child is usually known)

Date of Birth

| | | |
|--|--|--|
| | | |
|--|--|--|

Day Month Year

Age

Male Female

Any Disability (please describe) Please give details of reasonable adjustments

(SENDA 2001) that your child might require:

Nationality

2. Father's Details:

Please tick box if you are the main applicant

Full Name and title

Address

Telephone No Mobile No

Email address Nationality

Occupation

Workplace Address

and Telephone No

(In Case of Emergencies)

3. Mother's Details:

Please tick box if you are the main applicant *Please tick box if you are a joint applicant*

Full Name and title

Address

Telephone No Mobile No

Email address Nationality

Occupation

Workplace Address

and Telephone No

(In Case of Emergencies)

4. Doctor's Details:

Full Address
.....
Telephone No

5. Other Contact Details: (In Case of Emergencies)

Name and Address
.....
Telephone Number

6. Present school details:

Full Name and Address of Present School
.....
Telephone number Date of joining present school

| | | |
|--|--|--|
| | | |
|--|--|--|

Name of Head teacher Mr/Mrs/Ms/Miss Day Month Year

7. Finance:

If your child is offered a place at the Al-Ameen Preschool, which method of payment would you prefer?

Annual discounted payment (Early years government grant plus £2100.00 if paid in full)
monthly (£200.00)
admission fee: (£200.00)

8. Ethnic Origin Monitoring (Please tick one)

White British Black Other Asian Other Arab
White Irish Indian Other White & Black Caribbean information refused
White Other Pakistani White & Black African
Black Caribbean Bangladeshi White & Asian
Black African Chinese Other Mixed Background

9. Applicants' Declaration:

Please read the terms and conditions below and tick to confirm acknowledgement:

- a) Submission of a completed application form does not guarantee a place;
- b) The school's up-to-date School Prospectus in its entirety has been read and understood and I/we understand the procedure by which the application will be assessed;
- c) I/we understand a formal interview with both parents and child is a mandatory part of the admissions process;
- d) The information submitted in the form is correct and that any misleading information or contradictions will have negative implications on the application and if the child has already been admitted to the school, could lead to his/her withdrawal;
- e) Only children of the correct age will be admitted into each class;
- f) Unsigned and incomplete applications will not be accepted. We may not contact you to inform you your application has been rejected;
- g) A copy of our child's birth certificate is attached with this form.

By signing this application form we confirm agreement to the above:

Signature of applicant Date
Signature of joint applicant Date

Questionnaire

Part 1 - Basic Practice of Islamic Faith (max. 20 points):

Tick Yes or No

1. Do you, the father, pray five times a day?
2. Do you, the father, pray regularly in a masjid (jama'ah)?
3. Do you, the mother, pray five times a day?
4. Do you, the father, attend Friday/Jumu'ah prayers regularly?
5. Do you (father) pay zakah?
6. Do you (mother) pay zakah?
7. Do you (father) fast in the month of Ramadhan?
8. Do you (mother) fast in the month of Ramadhan?
9. Have you (the father) performed pilgrimage (Hajj)? If so, when? __/__/__ (date)

If you have not performed Hajj, please give your reasons.

(Your application will not be penalised if you have not performed Hajj but have a valid reason for not having done so.)

10. Have you (the mother) performed pilgrimage (Hajj)? If so, when? __/__/__ (date)

If you have not performed Hajj, please give your reasons.

(Your application will not be penalised if you have not performed Hajj but have a valid reason for not having done so.)

Part 2 - Active Commitment to Islam (max 10 points):

10. Have you helped your child to learn the Qur'an? Please give details below:
11. Are you (father or mother) engaged in any Islamic activities on a regular basis?
12. Have any of your children attended any other Muslim school?
Please give details below:
13. Do you exert any control over what your children watch on TV / Internet / or what they read in the books and magazines?

14. Are you observant with regards to checking the ingredients on food packages?
15. Do you, the mother, wear Hijab outside the home?

Part 3 - Siblings (brothers/sisters at the school) (max 5 points):

16. Does the child have any brothers or sisters currently studying at East London Islamic School?
If so, please give the full name and year group of the child:

Part 4 – Proximity (max 5 points):

17. Please give your full permanent address including the post code:

Part 5 – Transport (max 5 points):

18. Main mode of transport to school: (Please tick)
- Walk
- Train/Bus
- Private Car
- Car-share

Part 6 – Other (max 20 points):

19. We encourage applications from non-Muslims who along with their families support the high moral values of the Islamic faith.
If you are a not a Muslim, please detail your moral and life values on a separate sheet of paper and attach it to this application form, also clearly writing down your child's name and date of birth.
Please indicate you have attached information to be considered for this category by ticking the box.
20. Please detail any social problems the child experiences, e.g. if the child is from a single parent family, or is an orphan, or is being fostered and so on; on a separate sheet of paper and attach it to this application form, also clearly writing down your child's name and date of birth.
Please indicate you have attached information to be considered for this category by ticking the box.

EAST LONDON ISLAMIC PRIMARY SCHOOL

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PLEASE FILL IN ALL THE DETAILS REQUESTED & NOTIFY US OF ANY CHANGES TO THE INFORMATION GIVEN

Full name of child:

.....

Date of birth:

Address:

.....

.....

.....

.....

Telephone number: Mobile number:.....

Email Address:

Do you wish for your child to attend full or part time?

Please indicate sessions you would like below

| | AM | PM |
|------------------|-------|-------|
| Monday | | |
| Tuesday | | |
| Wednesday | | |
| Thursday | | |
| Friday | | |

Please provide the names and relationship of the persons allowed to collect your child/children. (PLEASE NOTIFY US OF ANY CHANGES)

Name:

Relationship to child:

Ph:

Name:

Relationship to child:

Name:

Relationship to child:.....

Language; what is the language spoken at home?

.....

(Please provide us with any favourite stories/key words which would support their home language)

Photographs

The staff will be taking photographs as part of our observations and using them in your child’s learning journey. They will be downloaded on the nursery computer printed and then deleted after one month. There will be one camera per room. Mobile phones/cameras from home are not permitted.

I give permission for photographs to be taken and used for my child’s learning journey.

Signed: Date:

Please provide the name, address and telephone number of your child’s doctor;

Doctors Name:.....

Address:

.....

.....

..... Postcode:

Telephone number:

Health information

Please tick if your child has had;

Chicken pox () Measles () Polio () Scarlet Fever () Whooping cough () Diphtheria () German

Measles ()

Please tick if your child has been immunised against;

Whooping cough () Polio () Measles () Diphtheria () Tetanus () Mumps () Rubella ()

Please give any details of any health issues, (including asthma), allergies etc.

.....
.....

Diet

Please state if your child has any dietary requirements (i.e. allergy/intolerance/religious reasons/parental preferences)

.....
.....

Medical

If we are unable to contact you please give permission to seek any necessary emergency advice or treatment that your child may have to have while in the care of the nursery.

Please sign and date below

Signed:

Date:

AGREEMENT

Fees are still payable if your child is absent due to illness

I agree to give one month's written notice before withdrawing my child/ren from nursery.

Signed:.....

Date: