



Photo of applicant

BAYTUL ILM

SECONDARY SCHOOL

Year ____ Application Form

Academic Year _____

FULL NAME: _____

UPN: _____

Admission No: _____

Please note the following:

- 1) You must use **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 Baytul Ilm Secondary School office by _____ so that we can process your application.
- 5) Please ensure that the Pre-Admission Form is completed by your son's current Madrasah and returned with this application form.

FIRST NAME:		MIDDLE NAME:	
SURNAME:			
DATE OF BIRTH:		AGE:	GENDER:
FULL ADDRESS:			
CITY:		POSTCODE:	
LANDLINE:		MOBILE:	
ETHNICITY: (Please complete the ethnicity form attached)			
RELIGION:			
FIRST LANGUAGE:		SECOND LANGUAGE:	
COUNTRY OF BIRTH:			
NAME OF SURGERY & DOCTOR:		ADDRESS:	
MEDICAL HISTORY:			
ALLERGIES:			
PHOTO/VIDEO PERMISSION (circle): YES / NO		TRIP PERMISSION (circle): YES / NO	
WOULD YOUR SON BE ENTITLED TO FREE SCHOOL MEALS? (circle) YES / NO			
ARE YOU ON ANY FORM OF INCOME BENEFIT? (circle) YES / NO		If YES, please give details:	
DOES THE STUDENT HAVE A SIBLING CURRENTLY ATTENDING BAYTUL ILM? IF YES,			
NAME:		YEAR:	

MOTHER'S INFORMATION

NAME OF MOTHER:			
FULL ADDRESS:			
CITY:		POSTCODE:	
LANDLINE:		MOBILE:	
OCCUPATION:		WORK NO:	
EMAIL:			

FATHER'S INFORMATION

NAME OF FATHER:			
FULL ADDRESS IF DIFFERENT FROM ABOVE:			
CITY:		POSTCODE:	
LANDLINE:		MOBILE:	
OCCUPATION:		WORK NO:	
EMAIL:			

IF PARENTS ARE DIVORCED OR SEPERATED, WHO HAS LEGAL CUSTODY OF THE CHILD?	
CUSTODY ARRANGEMENTS DETAILS & VISTING RIGHTS:	
WHO WILL BE RESPONSIBLE FOR PAYMENT OF SCHOOL FEES?	

WHY DO YOU WISH TO ENROL YOUR CHILD AT BAYTUL ILM SECONDARY SCHOOL?

EMERGENCY CONTACT 1

Note: Emergency contacts should be someone other than the applicant's mother/father/guardian.

NAME:			
FULL ADDRESS IF DIFFERENT FROM ABOVE:			
CITY:	POSTCODE:		
LANDLINE:	MOBILE:		
RELATIONSHIP TO CHILD:			

EMERGENCY CONTACT 2

NAME:			
FULL ADDRESS IF DIFFERENT FROM ABOVE:			
CITY:		POSTCODE:	
TELEPHONE:		MOBILE:	
RELATIONSHIP TO CHILD:			

CURRENT EDUCATION

NAME OF SCHOOL:			
MONTH/YEAR STARTED:			
FULL ADDRESS:			
CITY:		POSTCODE:	
LANDLINE:		FORM/CLASS TEACHER:	
HEADTEACHER:			
SCHOOL EMAIL:			
DOES THE CHILD HAVE A SEND (SPECIAL EDUCATION NEEDS AND DISABILITIES) STATEMENT? YES / NO If YES, please give details:			

IS THE CHILD ON THE SCHOOL'S SEN REGISTER? YES / NO

If YES, please give details:

Baytul IIm Secondary School may request your child's current school for further information. Should this be the case, we kindly request your consent:

I _____, parent of _____ (*applicant*) give consent to Baytul IIm Secondary School to request information from my child's current school.

Signature _____ Date _____

MADRASAH

NAME OF MADRASAH:	
FULL ADDRESS:	
CITY:	POSTCODE:
LANDLINE:	FORM/CLASS TEACHER:
HEADTEACHER:	
MADRASAH EMAIL:	

DOCUMENTS TO PROVIDE

1. **Passport Copy**
2. **School Report** (Most recent)
3. **One passport size photo of applicant** (Front of application)
4. **Proof of address**
5. **Madrasah Report** (See attached form to be completed)

PLEASE CIRCLE YOUR ETHNCITY

Full name: _____

- | | |
|--------------------------------|------------------------------------|
| Afghan | Lebanese |
| African | Asian Libyan |
| Albanian | Malay |
| Any other Asian background | Malaysian Chinese |
| Any other ethnic group | Mirpuri Pakistani |
| Any other mixed background | Moroccan |
| Arab other | Nepali |
| Asian & any other ethnic group | Other Asian |
| Asian & Black Other Black | |
| Asian & Chinese | Other Black African |
| | Other Chinese |
| Bangladeshi | Other Ethnic group |
| Black African | Other mixed background |
| Black Angolan | Other Pakistani |
| Black Congolese | Other White British |
| Black Ghanaian | Palestinian |
| Black Nigerian | Polynesian |
| Black Sierra Leonean | Portuguese |
| Black Somali | Serbian |
| Black Sudanese | Singaporean Chinese |
| Black/any other ethnic group | Sinhalese |
| Black & Chinese | Sir-Lankan Tamil |
| Black Caribbean | Taiwanese |
| Black European | Thai |
| Black North American | Turkish |
| Bosnian | White & Any other Asian background |
| Chinese | White & Any other Ethnic group |
| Chinese/any other ethnic group | White & Asian |
| Croatian | White & Black African |
| Egyptian | White & Black Caribbean |
| Filipino | White & Indian |
| Greek | White & Pakistani |
| Greek Cypriot | |
| Hong Kong Chinese | |
| Indian | |
| Iranian | |
| Iraqi | |
| Japanese | |
| Kashmiri other | |
| Kashmiri Pakistani | |
| Korean | |
| Kurdish | |

PRE-ADMISSION INFORMATION REQUEST MOSQUE/MADRASAH

(to be filled out by Imam / Ustadh)

Name of student: _____

Date of birth: _____

Name of Mosque/Madrasah: _____

Please mark as appropriate:

1. Excellent 2. Very Good 3. Good 4. Satisfactory 5. Poor

DESCRIPTION	LEVEL	DETAIL
Attendance	%	
Punctuality	%	
Behaviour		
Relationship with peers		
Relationship with staff		
Motivation		
Academic Ability		
Moral Character		

The above student is learning Qur'an at this Mosque / Madrasah under me

He is able to read the Qu'ran accurately (sahih). Yes / No

He has memorised _____ Surah's / _____ Juz(s) Yes/No

Any other information you would like to share:

I certify that the above student is enrolled with this Mosque /Madrasah.

Name of Imam / Ustadh: _____

Signature: _____

Date: _____

AGREEMENT

1. I agree to not interfere with the conducting of the school.
2. I agree to not approach or intimidate the class teacher.
3. I agree to hold myself responsible for any damages or injuries that may be caused by my child.
4. I agree to pay for the admission fee and the annual school fees of the child on the due dates.
5. I indemnify Baytul IIm Secondary School against any damages, injuries etc, during my child's attendance at the school.
6. I fully agree that my child will be subjected to, and I will fully comply with the rules and regulations of Baytul IIm Secondary School
7. I confirm that the information provided to the school is correct.
8. I will inform the school of changes in my contact details.

DECLARATION BY PARENT

Full name: _____

Signature: _____

Relationship to child: _____

Date: _____

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FOR OFFICIAL USE

Application Form	<input type="checkbox"/>	Passport Copy	<input type="checkbox"/>
Photo (Passport Size)	<input type="checkbox"/>	School Report	<input type="checkbox"/>
Proof of Address	<input type="checkbox"/>	Madrasah/Masjid Report	<input type="checkbox"/>
Admission Fee	<input type="checkbox"/>		