



Year ___ Application Form

Academic Year _____

NAME: _____

UPN: _____

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 Azhar Academy Girls School office by _____ so that we can process your application.
- 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 paid on the day of the entrance exam.

NAME:		MIDDLE NAME:		SURNAME:	
DATE OF BIRTH:			AGE:		GENDER:
FULL ADDRESS:					
CITY:			POSTCODE:		
TELEPHONE:					
ETHNICITY: (Please complete the ethnicity form attached)					
RELIGION:					
FIRST LANGUAGE:					
COUNTRY OF BIRTH:					
MEDICAL HISTORY (Is the child taking any medication?):					
NAME OF SURGERY & DOCTOR:			ADDRESS:		
ALLERGIES:					
PHOTO PERMISSION (circle): YES / NO			TRIP PERMISSION (circle): YES / NO		
WOULD YOUR DAUGHTER BE ENTITLED TO FREE SCHOOL MEALS? (circle) YES / NO					
ARE YOU ON ANY FORM OF INCOME BENEFIT? (circle) YES / NO					
DOES THE PUPIL HAVE A SIBLING CURRENTLY ATTENDING AZHAR? IF YES					
NAME:			YEAR:		
MAIN EMAIL (required):					

MOTHER'S INFORMATION

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

FATHER'S INFORMATION

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

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:	
TELEPHONE:		MOBILE:	
RELATIONSHIP WITH CHILD:			

EMERGENCY CONTACT 2

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

PREVIOUS EDUCATION

SCHOOL ATTENDING:			
UPN (obtain from school):			
FULL ADDRESS:			
CITY:			POSTCODE:
TELEPHONE:			FORM/CLASS TEACHER:
HEADTEACHER:			
SCHOOL EMAIL:			

MADRASSA

SCHOOL ATTENDING:			
FULL ADDRESS:			
CITY:			POSTCODE:
TELEPHONE:			FORM CLASS TEACHER:
HEADTEACHER:			
EMAIL:			

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 registration fee and the annual school fees of the child on the due dates.
5. I indemnify Azhar Academy Girls 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 Azhar Academy Girls 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 with child: Date:

.....

FOR OFFICIAL USE

Madrassa form

Photo identification

References



PLEASE TICK YOUR ETHNCITY

Full name: _____ Form _____

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

Would your daughter be entitled to Free School Meal, if she was in a state school? Please tick.

YES NO

Do you receive any type of benefits? Please tick.

YES NO





235a Romford Road
 Forest Gate
 London E7 9HL
 Tel: 020 8555 5959
 E: girls.school@azharacademy.org

AAGS Admissions Pupil Information Form

NAME OF PUPIL	
NAME OF SCHOOL	
YEAR GROUP	
D.O.B	
ETHNICITY	
IS THIS PUPIL ENTITLED TO FREE SCHOOL MEAL?	
UPN NUMBER	

Please complete the table below using the following criteria:

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

	(1 TO 5)	COMMENTS
BEHAVIOUR		
EFFORT		
HOMEWORK		
RELATIONSHIP WITH PEERS		
RELATIONSHIP WITH TEACHERS		
	PERCENTAGE (%)	COMMENT
ATTENDANCE		
PUNCTUALITY		

Please provide information on the pupil's current level and expected level at the end of KS2

SUBJECT	CURRENT LEVEL- COMPARED TO THE NATIONALLY EXPECTED LEVEL	EXPECTED LEVEL END OF KS2- COMPARED TO THE NATIONALLY EXPECTED LEVEL
ENGLISH		
MATHS		
SCIENCE		

Has the pupil ever been suspended from the school? Yes / No

Details and date of suspension(s)

.....

NAME OF TEACHER		School Stamp
SIGNATURE		





235a Romford Road
Forest Gate
London E7 9HL
Tel: 020 8555 5959
E: girls.school@azharacademy.org

PRE-ADMISSION INFORMATION REQUEST-MOSQUE/MADRASSA

(to be filled out by Imam / Ustadh)

Name of student:

Date of birth:

Name of mosque/madrassa

Please mark as appropriate:

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

DESCRIPTION	LEVEL	DETAIL
Attendance		____ % (Please specify attendance percentage)
Punctuality		
Behaviour		
Relationship with peers		
Relationship with staff		
Motivation		
Academic Ability		
Moral Character		

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

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

She has memorised _____ Surahs / _____ Juzz(s) Yes No

Any other information you would like to share:

I certify that the above student is enrolled with this mosque /madrassa.

Name of Imam / Ustadh:

Signature:

Date:

Seal/stamp of mosque/madrassa