

مدرسة نصر الدين الإسلامية



NASRUDDIN *Islamic School*

LEARNER APPLICATION FORM

LEARNERS NAME

APPLYING FOR GRADE

FOR THE YEAR

E-mail: primary@nasruddin.co.za
www.nasruddin.co.za

Revised: April 2018

NASRUDDIN *Islamic School*

Please Note: Completion of this application form is not a guarantee that your child will be accepted at Nasruddin Islamic School. You will be informed of the School's decision as soon as possible. An interview will be required.

ADMISSION POLICY

1. The admission of learners is subject to availability of space in the respective grade to which the learner seeks admission.
2. Admission to the school will be determined by the following criteria:
 - 2.1 Academic competence to cope with the respective Grade.
 - 2.2 Respect for the Islamic ethos of the school.
 - 2.3 The learner must have an unblemished record in respect of his / her behaviour at the previous school.
 - 2.4 "The first come first served principle", will be given preference.
 - 2.5 Siblings will be given preference, provided they apply timeously and meet all other admission requirements.
3. Learners of N.I.S. who take leave to complete HIFZ on a full time basis will qualify for re-admission.
4. A learner who seeks admission in **GRADE ONE** must turn 7 during the year in which admission is sought.
5. The Admission Committee reserves the right to interview any applicant.
6. Applicants who are unsuccessful for the current year **must** complete a new application if they wish to apply for the following year.
7. The Admissions Committee reserves the right to accept applicants in any Grade, notwithstanding the above criteria. The decision of the Admissions Committee will be regarded as final.

PRIMARY SCHOOL

Cnr. Van der Kemp & Van Rooyen St.
Parkside
Port Elizabeth
6020

Tel: (041) 457-2338/2645

Fax: (041) 457-1610

email: primary@nasruddin.co.za

P.O. Box 16384, Gelvandale, Port Elizabeth, 6016

NASRUDDIN *Islamic School*

YOUR APPLICATION CAN ONLY BE PROCESSED ONCE THE FOLLOWING DOCUMENTATION HAS BEEN RECEIVED BY THE SCHOOL:

ALL COPIES MUST BE CERTIFIED

- * COPY OF BIRTH CERTIFICATE
- * COPY OF CLINIC CARD
- * COPY OF MOST RECENT SCHOOL REPORT
- * COPY OF MOST RECENT MADRESSA REPORT
- * R200-00 Administration Fee (non-refundable)
- * CONFIRMATION OF ADDRESS e.g. Electricity account
- * COPY OF I.D. OF BOTH PARENTS.
- * COPY OF PASSPORT (FOREIGNERS)
- * ONE COLOUR I.D. PHOTOGRAPH OF LEARNER.

PLEASE TYPE OR PRINT CLEARLY IN BLOCK LETTERS

A) Application for admission to Grade: _____ for year _____

1. Applicants full name: _____
SURNAME NAMES

2. Date of Birth: _____
DAY MONTH YEAR

3. Learner's I.D. / Passport No. _____

4. **Gender:** Female: Male:

5. **Math-hab:** Hanafi Shaafi

6. **Permanent Address of Learner**

7. **Temporary Address of Learner**

Code: _____

Code: _____

Tel: _____

Tel: _____

Cell No: _____

Cell No: _____

8. **With whom does the child stay:**

Both Parents

Mother

Father

Other

If other, please detail:	
Name	
Relationship	
Address	

B). Family Data

Father

Married
Remarried
Widowed
Guardian

Divorced
Separated
Single

Mother

Married
Remarried
Widowed
Guardian

Divorced
Separated
Single

Name: _____

Name: _____

Home Address: _____

Home Address: _____

Postal Code: _____

Postal Code: _____

Home Tel: _____

Home Tel: _____

Cell No: _____

Cell No: _____

Postal Address: _____

Postal Address: _____

I.D. Number: _____

I.D. Number: _____

Occupation: _____

Occupation: _____

Current Employer: _____

Current Employer: _____

Type of Business: _____

Type of Business: _____

Business Address: _____

Business Address: _____

Work Tel No: _____

Work Tel No: _____

Fax No: _____

Fax No: _____

E-mail: _____

E-mail: _____

Next of Kin: (not living at the same address)

Accounts / Correspondence to be addressed to:

Name: _____

Relationship: _____

Home Address: _____

Tel No: _____

MEDICAL

Does your child suffer from Asthma, Epilepsy, or any other illnesses?

.....

Is your child allergic to anything?

Other Medical conditions the school needs to be aware of:

.....

N.B. Immunisation against Poliomyelitis and Tuberculosis (BCG) is compulsory by statute.

We hereby certify that the information given by us on this application form is complete and accurate.

We agree to the conditions as set out below.

E). CONDITIONS OF ACCEPTANCE OF PLACE

1. We are aware that a term's notice must be given before a learner leaves N.I.S or a full term's fees must be paid in lieu thereof. In addition to the tuition fees charged by N.I.S, we agree that we shall be liable to pay any increases in such fees or any levy imposed by N.I.S.
2. We accept joint and several liability to N.I.S. for the due and punctual payment of all school fees, subscriptions, levies or other amounts which may become due and payable to N.I.S. or in respect of participation or attendance in any extra-curricular activity.
3. All learners are subject to the regulations, rules and routine of the school as laid down by the head. Parents undertake to co-operate with the school authority in enforcing them.
4. The parent / guardian accept the authority of the Principal and teachers.
5. Should a learner be removed from the school by reason of breach of school rules, the parent shall remain liable for fees due for the full term during which the learner was removed, and if such fees have been paid the school shall not be obliged to refund any portion thereof.
6. The school will not be held liable for any loss of learners' possessions.
7. A full term's notice of withdrawal shall be given in writing to the head, whether such notice is to be effective during the currency of the school year, or one full term's fees must be paid in lieu for such notice.

8. One full month's fee is payable in the event of withdrawal between the date of acceptance of a place offered and the beginning of term.
9. In the event of the school having to institute action to recover fees, the parents shall be liable to make payment of all costs incurred by the school, as between attorney and client.
10. In the event of action being instituted for outstanding fees, the parents will consent to the jurisdiction of the magistrate's court.
11. Fees for each quarter should be payable at the beginning of each term.
12. If you have more than one child at the school you are also entitled to a discount – (contact school bursar).

F). NB: WARNING: Any fraudulent information with regard to Home address, Date of Birth, etc. can result in the child being asked to leave the School as soon as this becomes known.

I, _____ the parent / guardian of the above learner hereby apply for admission and agree to abide by the rules and regulations governing the school and pay the school fees punctually.

N.B. The signatures of both Parents and / or Guardian are required.

Father's Signature: _____

Date: _____

Mother's Signature: _____

Date: _____

Guardian's Signature: _____

Date: _____

TO BE COMPLETED BY BURSAR / PRINCIPAL OF CURRENT SCHOOL

Name of School:

Address:

Tel. Number:

Contact person / bursar at present school:

Name of person responsible for payment of fees:

School Fee Payments:

UP TO DATE		IN ARREARS	
------------	--	------------	--

Signed by Bursar / Principal:

Date:

School Stamp

PLEASE RETURN TO:

The Secretary:
NASRUDDIN ISLAMIC SCHOOL
Cnr Van der Kemp & Van Rooyen Street
Park Side
Port Elizabeth
6020

FOR OFFICIAL USE ONLY

Date of Appointment & Time		Attached Documents		
		R200-00 Admission Fee (non-refundable)		Confirmation of Address
		Birth Certificate		Copy of Father's I.D,
D6+		Clinic Card		Copy of Mother's I.D.
SASAMS		Recent school report (if applicable)		Copy of Passport (Foreigners)

Interview Date: _____

Name of Learner: _____

Grade: _____

Year: _____

Administration Fee: Yes / No	Registration Fee: Yes / No
Receipt No:	Receipt No:
Transfer Card (If Applicable): Yes / No	Interview: Yes / No
Previous School attended: _____	
Accepted: Yes / No	Acceptance letter sent: Yes / No
	Date sent: _____

Principal: _____

Comments:
