

## **MADRASAH ADMISSION FORM**

Revised: Jan 2022

Please enclose the one-off, non-refundable registration fee of £30 per application

DETAILS OF APPLICANT			
Forename(s): Text	Surname:		
Gender: Male Female	Date of Birth: / / / / / / / / / / / / / / / / / / /		
Ethnic Origin:	Place of Birth: Country:		
APPLICANT'S PERMANANT ADDRESS OF RESIDENCE	ALTERNATIVE CONTACT DETAILS (Emergency Details)		
Road/Street:	Full Name:		
House No. Town/City: Leicester	Relationship to applicant:		
Post Code:	Contact No.		
DETAILS OF PARENT(S) / GUARDIAN(S)			
Father's Full Name:	Mother's Full Name:		
Address (if different from above):	Address (if different from above):		
House No.	House No.		
Road/Street:	Road/Street:		
Post Code:	Post Code:		
Occupation:	Occupation:		
Home No.	Home No.		
Work No.	Work No.		
Mobile:	Mobile:		
Email Address:	Email Address:		
DETAILS OF PREVIOUS MADRASAH			
Has the applicant previously studied at another Madrasah? Yes No If no, go to next section			
Madrasah Name: Town/City:			
What has the applicant studied so far? Beginner Qa'idah Juzz Ammah Qur'an			
Kitaabs / other subjects studied:			
Reason for wishing admission to this Madrasah:			

OTHER DETAILS			
Applicant's school / college name:		Full Time Part Time	
Does your child have any siblings at this Madrasah? If so, what are their full names?			
1.			
2.			
3.			
PERSON(S) AUTHORISED TO COLLECT THE APPLICANT FROM MADRASAH			
Name:	Relationship with child:	Mobile No.	
1.			
2.			
3.			
PLEASE TICK THE FOLLOWING BOX IF APPLICABLE:			
I confirm that my child(ren) is/are old enough and responsible. I therefore grant DARUL IHSAAN permission to allow my child(ren) to return home alone.			
OTHER DETAILS (Special Needs)			
Does your child have any learning disability?	Yes No	If yes, please give details:	
Does your child suffer from any medical condition(s)/allergy(s)? Yes No If yes, please give details:			
Does your child take any regular medication?	Yes No	If yes, please give details:	
DECLARATION			
I, the Parent/Guardian of the above-mentioned applicant declare that all the information provided in this form is true and accurate to the best of my knowledge. I have read and understood the Admission Policy, rules and regulations of DARUL IHSAAN. I confirm that I accept and agree to abide by all of them. I understand that failure to abide by these rules and regulations by me and/or my child can result to their dismissal from the Madrasah.			
Full Name of Parent/Guardian:			
Sign of Parent/Guardian:	Date:/		
FOR OFFICE USE ONLY (to be completed by Madrasah Administration)			
Date of Admission Test:	Date of Admission:	Date of Admission:	
Admission Fee: <b>£</b>	Fee PCM: <b>£</b>	Fee PCM: <b>£</b>	
Student ID No.	Islamic Studies Year:	Islamic Studies Year:	
Qur'an Level:	Qur'an Class:	Qur'an Class:	
Comments:	Authorised Signature:	Authorised Signature:	