

Al-Aqsa Islamic Academy

1501 N. Germantown Ave. Phila. PA 19122 Phone: 215-765-6660 Fax: 215-765-6640

ENROLLMENT FORM FOR SCHOOL YEAR 2023 - 2024

STUDENT INFORMATION			
STUDENT NAME (first middle last – as on Social Security Card)	GRADE AS OF SEPT 2023	DATE OF BIRTH	GENDER
PRIMARY HOME ADDRESS		HOME PHONE	
STUDENT EMAIL ADDRESS			
SOCIAL SECURITY NUMBER	STUDENT'S PREFERRED NAME	STUDENT'S PHONE	
STUDENT SIBLINGS			
NAME:	DATE OF BIRTH:	SCHOOL ATTENDING:	
NAME:	DATE OF BIRTH:	SCHOOL ATTENDING:	
NAME:	DATE OF BIRTH:	SCHOOL ATTENDING:	
FAMILY INFORMATION (<input type="checkbox"/> Check here if home address & phone is same for both parents)			
PARENT NAME:	RELATIONSHIP TO STUDENT	PARENT NAME:	RELATIONSHIP TO STUDENT
HOME ADDRESS		HOME ADDRESS	
HOME PHONE		HOME PHONE	
PARENT EMAIL		PARENT EMAIL	
CELL		CELL	
EMPLOYER		EMPLOYER	
OCCUPATION		OCCUPATION	
WORK PHONE		WORK PHONE	

Emergency Contact: Who should we contact in case of an Emergency (Other than parent)

- | | | | |
|----|------|--------------|-----------|
| 1. | Name | Relationship | Telephone |
| 2. | Name | Relationship | Telephone |
| 3. | Name | Relationship | Telephone |

STUDENT LIVES WITH (check all/any that apply):

- MOTHER FATHER & STEPMOTHER MATERNAL GRANDPARENT (specify name):
 FATHER MOTHER & STEPFATHER PATERNAL GRANDPARENT (specify name):
 FATHER & MOTHER CO-PARENT (specify name):
 OTHER (specify name and relationship to student):

DESCRIPTION OF SPECIAL LIVING SITUATIONS

The following information helps us to be more accurate in our communications with you. Please check all that apply to your child.

- PARENTS MARRIED PARENTS DIVORCED MOTHER HAS CUSTODY MOTHER DECEASED
 SINGLE PARENT PARENTS SEPARATED FATHER HAS CUSTODY FATHER DECEASED
 JOINT CUSTODY OTHER (please explain):

Annual Tuition**Needed Documents for registration**

New Student Registration Fee: \$400

 Registration Fee

Returning Student Registration Fee: \$300

- Birth Certificate
 Social security card

Kindergarten to 12th Grade:

\$5000 for the 1st child **in the household**
 \$4000 for the 2nd child **in the household**
 \$3800 for the 3rd child **in the household**
 \$3600 for the 4th child **in the household**

- Report Card
 Shot records
 Physical Form
 Dental Form

Payment Policy

- I agree that my child will not be enrolled unless I pay the registration fee and bring all the documents
 I agree that I will pay my tuition all at once or in 9 monthly installments
 I agree that the 1st payment will be a double payment and due before the start of school
 I agree I will pay before every 5th of the month starting in October and ending in May
 I agree to a \$25 late fee if I am late on my payments

Who is authorized to pick up your child

Name:	Relation
Name:	Relation:
Name:	Relation:

Race (Check all that apply)

For statistical purposes, your family identifies as: Please check all that apply.

- AFRICAN AMERICAN, BLACK NATIVE AMERICAN OR ALASKA NATIVE
 ASIAN AMERICAN NATIVE HAWAIIAN/OTHER PACIFIC ISLANDER AMERICAN
 HISPANIC AMERICAN OR LATINO WHITE, EUROPEAN AMERICAN
 MIDDLE EASTERN AMERICAN
 MULTIRACIAL AMERICAN
 OTHER _____ INTERNATIONAL

Primary language, if other than English:

Medical Authorization

I, _____, authorize any staff member of Al-Aqsa Islamic Academy to take my
(Parent/Guardian)

child, _____, to the nearest hospital for emergency medical treatment. I agree to hold
(Student)

Al-Aqsa Islamic Academy harmless for any unforeseen accident in the school or on the school grounds. I also authorize, if I cannot be reached, the emergency contacts to take my child home in the case of a non-emergency illness at school.

Medical Information

Student Name: _____ DOB: _____

Address: _____

Physician: _____ Telephone: _____

Insurance Name: _____ Policy No. _____

Name of Policy Holder: _____

Parent/Guardian Signature

Date

Health Information

Allergies: YES NO

List:

Medications YES NO

List:

Photo Permission:

I understand Al-Aqsa Islamic Academy staff will take photos throughout the year and also may film the students for educational, documentary, or advertising the school.

I understand Al-Aqsa Islamic Academy staff might put these pictures and videos on the website and social media.

Commitment to Al Aqsa Islamic Academy:

I agree to the following rules and regulations of Al-Aqsa Islamic Academy

- I understand that I must check Jupiter regularly to review my child's progress. I will also attend all parent-teacher conferences (Report Card distributions).
- I understand I must pay the tuition and fees on time and understand that there is a late fee.
- If fees are unpaid, I understand that we will be responsible for the costs of a collection agency, associated court costs, and lawyer costs.
- I will purchase the uniform for my child(ren) from the school. Uniforms are described in the School Handbook. Uniforms must be worn from the first day of school and every day.
- I understand if my child is not wearing the school uniform they will not be permitted in the classroom.
- I understand I must buy my child's gym uniform from the school for them to wear on gym days.
- I understand that lateness of my child(ren) is to be avoided and that 3 days of lateness equals one day of absence. 15 days of unexcused absences will equal retention in the grade.
- I understand Arabic, Quran, and Islamic Studies are major subjects and failing them will mean retention in the grade for the student.
- I understand my child must always behave with Islamic morals and manners.
- My child must be respectful to all staff, teachers, and students
- I understand I must pick up my child at dismissal time and if I am late there will be a charge.
- I understand my child is not permitted to use any electronic devices including phones, Airpods, and Apple watches during school hours.
- I understand that we must abide by all Al-Aqsa codes, rules, guidelines, and procedures as stated in the School Handbook.
- I understand if any information changes, I must let the school know as soon as possible.

Parent Name

Parent Signature

Date

Transportation

- Public School Bus Septa Parent Pick-Up Walking Other _____

Best way we can contact you: Check all that apply

- Jupiter Email phone number

Are you available to volunteer

- Yes No

SIGNATURE

DATE