



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

AL-INARAH INTEGRATED SCHOOL

BASIC EDUCATION • TAHFEEZ • ARABIC & QUR'ANIC COMPREHENSION

Family Admission Form — Motto: Academic, Moral and Faith

PASSPORT

PHOTOGRAPH

BEFORE YOU SUBMIT — PLEASE NOTE:

Required attachments: Child's birth certificate, 2 recent passport photographs, and previous school's report card / transfer certificate (if applicable).

Submission deadline: Forms should be returned at least 2 weeks before the start of the academic session.

How to submit: Return this form in person to the school office, or email a scanned copy to admissions@alinarahschool.com.

ACADEMIC SESSION

APPLICATION NUMBER

DATE SUBMITTED

STUDENT INFORMATION

FULL NAME OF CHILD

DATE OF BIRTH

GENDER (M / F)

CLASS APPLYING FOR (CRECHE – PRIMARY 6)

ENROLMENT OPTION (DAY / BOARDING)

NATIONALITY / STATE OF ORIGIN

CURRENT SCHOOL (IF ANY)

CURRENT CLASS

LANGUAGES SPOKEN

BIRTH CERTIFICATE / NATIONAL ID NUMBER

REASON FOR LEAVING CURRENT SCHOOL

TRANSFER CERTIFICATE (ATTACHED / PENDING / N/A)

SIBLING INFORMATION (IF ANY CURRENTLY ENROLLED AT AL-INARAH)

SIBLING'S FULL NAME

CLASS

RELATIONSHIP TO APPLICANT

SIBLING'S FULL NAME

CLASS

RELATIONSHIP TO APPLICANT

PARENT / GUARDIAN DETAILS

FATHER / GUARDIAN FULL NAME

OCCUPATION / EMPLOYER

TELEPHONE

FATHER / GUARDIAN EMAIL ADDRESS

MOTHER / GUARDIAN FULL NAME

OCCUPATION / EMPLOYER

MOTHER / GUARDIAN TELEPHONE

MOTHER / GUARDIAN EMAIL ADDRESS

HOME ADDRESS

EMERGENCY CONTACT & RELATIONSHIP

EMERGENCY TELEPHONE

HOME LOCAL GOVERNMENT AREA

HOW DID YOU HEAR ABOUT AL-INARAH?

☐ Word of Mouth

☐ Social Media

☐ Mosque / Islamic Centre

☐ Flyer / Signage

☐ Existing Al-Inarah Parent

☐ School Website

☐ Other: _____

ISLAMIC & RELIGIOUS BACKGROUND

Religious / Educational Background:

☐ Madrasah Background

☐ Integrated Islamic School

☐ Home Qur'an Schooling

Can the child recognize Arabic letters?

☐ Yes

☐ No

Can the child fluently read the Qur'an?

☐ Yes

☐ No

Current Memorization Level:

State Juz' or Surah range, e.g. "Juz 30" or "Surah Al-Fatiha to Al-Fil"

☐ Beginner Level

☐ Selected Short Surahs

☐ Complete Juz Amma

HEALTH & MEDICAL INFORMATION

MEDICAL CONDITIONS / ALLERGIES (IF ANY)

BLOOD GROUP

GENOTYPE

SPECIAL NEEDS / LEARNING ACCOMMODATION REQUIRED (IF ANY)

PARENT DECLARATION

I certify that the details provided above are complete and accurate, and I agree to support the school's Islamic values, punctuality expectations, institutional policies, and financial obligations as a partner in my child's education.

PARENT'S PRINT NAME

RELATIONSHIP TO CHILD (FATHER / MOTHER / GUARDIAN)

SIGNATURE

DATE

FOR OFFICIAL / ADMISSIONS OFFICE USE ONLY

INTERVIEW DATE

ADMISSION DECISION (ADMITTED / DEFERRED / NOT ADMITTED)

CLASS PLACED INTO

RESUMPTION DATE

STAFF NAME

STAFF SIGNATURE