



Passport
Photograph

Form No:

Receipt No:

- Pre-nursery
- Darul Huda
- Day/Boarding
- Nursery
- Primary
- Secondary

ENTRANCE
Application Form
Into
I-Scholars International Academy, Abuja

Plot C86, C90, C92, C93 Road 5213, Behind SOAR PLAZA, Gwarinpa Estate, Abuja.
Tel: 08035347927, 08065387733, 08080212456 E-mail: info@ischolarsintlacademy.com
www.ischolarsintlacademy.com

Name.....

14__ / 14__
20__ / 20__ session

APPLICATION FOR ADMISSION

Academic Year							
1	4			to	1	4	
2	0			to	2	0	

Class of Study						
Pre-Nursery	Nursery	Darul Huda	Primary		Secondary	
			Grade 1 - 3	Grade 4 - 6	JSS	SSS
(Please tick as appropriate)						

Bio-Data of the Child

Name of Child:			
	Surname	First Name	Other Name
Age as at last Birthdate	<input type="text"/>	Age as at September	<input type="text"/>
Date of Birth:	Day: <input type="text"/>	Month: <input type="text"/>	Year: <input type="text"/>
State of Origin	(Please tick as appropriate)		Sex: Male: <input type="checkbox"/> Female: <input type="checkbox"/>

Address Details

Present address as at time of application:	

Name and Occupation of Parent(s) or legal Guardian(s)

Father		Occupation	
Mother		Occupation	
Guardian		Occupation	

Address of Parent(s) or Legal Guardian(s) if different from above:	

E mail:	
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Daytime Telephone No:	
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Work Telephone No:	
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Home Telephone No:	
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Mobile No:	
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Previous School(s) Attended	Location:	From	To	Last Class

Medical and/or Psychological Condition:**Has your child been seen/or is due to be seen by an educational psychologist?**Yes No
(Please tick as appropriate)*Details (If Yes)***Does your child have a statement of special educational need?**Yes No
(Please tick as appropriate)*Details (If Yes)***Has your child had any behavioural problems in previous schools?**Yes No
(Please tick as appropriate)*Details (If Yes)***Does your child have any physical disabilities? E.g. use of wheelchair, walking frame, others)***Details (If Yes)***Please indicate the subject areas that your child enjoys most and is very interested in.****Please indicate the areas that your child has demonstrated significant achievements****Has your child ever been suspended or expelled from or asked to leave a school any time?
Please give full details.****If you have any specific health condition of the child you may like to inform the school, including chronic medical and/or psychological conditions, please indicated them:****Further Details:****Please give any further details that may support your application: (Please continue on a separate sheet of paper if required, placing your child's name and date of birth at the top and staple to this form)****Declaration:****I confirm the information supplied is true and complete to the best of my knowledge. I understand that by completing this form, a place is not automatically guaranteed.**Signature: Date:
(Day)
(Month)
(Year)

Way of Life (Questionnaire)

Have you helped your child to learn the Qur'an? Please give details below Yes No

Are you as Parents engaged in any Islamic activities on a regular basis? Yes No

Has any of your children attended any other Muslim School? Yes No
Please give detail below

Do you exert any control over what your children watch on TV/Internet or what they read in Books and Magazine? Yes No

Are you observant with regards to checking the ingredients on food packages? Yes No

Are your children exposed to violence/abuse? Yes No

Do you smoke/drink alcohol in the presence of your children? Yes No

Do you encourage the wearing of hijab outside the home? Yes No

This form should be completed, and submitted with the following items:

- Evidence of Payment
- Birth certificate of the child/ward
- Two recent passport size photographs of the child/ward
- Copy of child/ward immunization card
- Transfer certificate from last school attended
- Last academic report of the child/ward
- Further details that may support your application if available

For Office use only.

Date received	Application Fee Paid	Age on 1st Sept.	Class of Study	Class Offered	Admission Number

Entrance/Interview Result.

Recommendation:.....

.....Sign.....