



# The Islamic Academy For Peace Registration/Reenrollment Form

<i>For Office Use Only</i>	
Date Received: _____	Registration Fee: _____

Today's Date: \_\_\_\_\_ Year of 2020-2021

## DAYCARE THROUGH GRADE 8

- Yes, we intend to register / re-enroll our child(ren) in The Islamic Academy for the 2020-2021 academic year.
- No, we do not intend to register/re-enroll our child(ren) in The Islamic Academy for the 2020-2021 academic year.

### Section - 1: Students' Information

<b>Child #1- Name:</b> _____			Date of Birth: _____ M__ F__	
_____	_____	_____	_____	_____
Last		First		MI
Country of Birth: _____		Citizenship: _____		Requested entry into grade: _____
Child address if different than Parent/Guardian listed in <b>Section-3</b> : _____				
Child lives with: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both Parents <input type="checkbox"/> Other				
If <b>new</b> registration, additionally fill the fields with *				
*Currently enrolled in (School name and address): _____				
*Phone # _____		*Fax # _____		*Current Grade: _____
*Knowledge of Arabic (Little, Medium, High): _____			*Knowledge of Quran (Little, Medium, High): _____	
<b>Child #2- Name:</b> _____			Date of Birth: _____ M__ F__	
_____	_____	_____	_____	_____
Last		First		MI
Country of Birth: _____		Citizenship: _____		Requested entry into grade: _____
Child address if different than Parent/Guardian listed in <b>Section-3</b> : _____				
Child lives with: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both Parents <input type="checkbox"/> Other				
If <b>new</b> registration, additionally fill the fields with *				
*Currently enrolled in (School name and address): _____				
*Phone # _____		*Fax # _____		*Current Grade: _____
*Knowledge of Arabic (Little, Medium, High): _____			*Knowledge of Quran (Little, Medium, High): _____	
<b>Child #3- Name:</b> _____			Date of Birth: _____ M__ F__	
_____	_____	_____	_____	_____
Last		First		MI
Country of Birth: _____		Citizenship: _____		Requested entry into grade: _____
Child address if different than Parent/Guardian listed in <b>Section-3</b> : _____				
Child lives with: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Both Parents <input type="checkbox"/> Other				
If <b>new</b> registration, additionally fill the fields with *				
*Currently enrolled in (School name and address): _____				
*Phone # _____		*Fax # _____		*Current Grade: _____
*Knowledge of Arabic (Little, Medium, High): _____			*Knowledge of Quran (Little, Medium, High): _____	
<b>Language(s) Spoken at Home:</b> _____				
(Primary language)			(Other languages)	
<b>Ethnicity**:</b> Middle Eastern    Asian    African American    Hispanic    White    Two or more Races    ** this information is for statistical purposes only				

## Section - 2: Students' Health Information

Student's Physician (If more than one, list all): \_\_\_\_\_ Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Student Name: \_\_\_\_\_ Date of last physical exam: \_\_\_\_\_ Are immunizations current? \_\_\_\_\_

Student Name: \_\_\_\_\_ Date of last physical exam: \_\_\_\_\_ Are immunizations current? \_\_\_\_\_

Student Name: \_\_\_\_\_ Date of last physical exam: \_\_\_\_\_ Are immunizations current? \_\_\_\_\_

Health concerns of which the school should be aware: (*allergies, illness, surgeries, etc.*) (List students' name and the information)

\_\_\_\_\_

## Section - 3: Family Information

<p>Father: _____</p> <p style="text-align: center;">Last                      First                      MI</p> <p>Address: _____</p> <p><i>(if different from student's)</i></p> <p>_____</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Work Phone: _____</p> <p>Cell Phone: _____</p> <p>Father's E-mail: _____</p> <p>Other family members living in the household: _____</p> <p>Other siblings attending The Islamic Academy: _____</p>	<p>Mother: _____</p> <p style="text-align: center;">Last                      First                      MI</p> <p>Address: _____</p> <p><i>(if different from student's)</i></p> <p>_____</p> <p>Occupation: _____</p> <p>Employer: _____</p> <p>Work Phone: _____</p> <p>Cell Phone: _____</p> <p>Mother's Email: _____</p>
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## Volunteer Information

All Islamic academy parents **are required to complete 10 hours of mandatory school service\*** during the academic year. Please give an indication below, of the type of service you will be able to provide.

<input type="checkbox"/> Being a Homeroom Parent <input type="checkbox"/> Scholastic Book Fair (once in a year for a week) <input type="checkbox"/> Picture day Event (once in a year for a day) <input type="checkbox"/> Field Day (Preparation and the actual day) <input type="checkbox"/> Hajj Presentation <input type="checkbox"/> G8 Graduation (Preparation and the actual day) <input type="checkbox"/> ACT Testing Week <input type="checkbox"/> Islamic Studies Project Day (All Day) <input type="checkbox"/> Science Project Day (All Day) <input type="checkbox"/> Award Ceremonv (Preparation and the actual dav)	<input type="checkbox"/> Assisting classroom teachers or office (i.e. photocopying, collating papers) <input type="checkbox"/> Assisting with TIA Fundraising <input type="checkbox"/> Running or Assisting After School Programs (i.e. Girl & Boy Scouts, Mathcounts, Computer club, Arts & Crafts, Sewing, etc.) <input type="checkbox"/> Serving as school crossing guard in the parking lot <input type="checkbox"/> Assisting with building maintenance when needed <input type="checkbox"/> Summer Cleanup – (re-arrange classrooms, help cleaning, etc.) <input type="checkbox"/> Painting various rooms in the building during summer <input type="checkbox"/> Other: _____
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I have paid a non-refundable fee of \$100 for each returning student / \$150 for each new student with this form. I understand that the registration is not complete until the registration, books & supplies and P.E fees are all paid, TIA will not reserve the spot for my child. I also understand that the books, supplies and PE & Tech fee totaling \$485 are non-refundable. I'm aware that my family contact can be shared with the Parent-Teacher Organization for volunteering purposes.

\*Volunteer check of \$200 collected in the beginning of the academic year, will be cashed at the end of academic year. if mandatorv school service is not completed.

**Parent's Signature** \_\_\_\_\_