



Saturday Islamic School

c/o Redbridge Islamic Centre
email info@redbridgeislamiccentre.co.uk

APPLICATION FOR ADMISSION

**You are requested to read the guidance carefully and complete all sections of the form.
The information given will be used for short listing children for the interviews.**

- Applications are invited from girls and boys aged 5 to 11 years old for the available places

Section 1: DETAILS OF PARENTS/APPLICANTS

Father's full name	
Mother's full name	
Postal address <i>with full postcode</i>	
Home telephone number	
Emergency contact (Name, address & telephone)	

Section 2: DETAILS ABOUT THE CHILD

Child's full name	
Child's date of birth	
Please briefly state child's experiences of learning at home <i>You may continue on a separate sheet of paper if required</i>	

Section 3: MEDICAL INFORMATION

Does your child have a medical condition? (e.g serious illness for which medication is necessary)	
Is your child allergic to anything?	
Please use the space opposite to record any other medical information which is important for the school to know...	

Section 4: ONLY TO BE COMPLETED BY CHILDREN AGED OVER 7½ YEARS

Please tick all the surah that your child has memorised fully. It is important that you assess your child carefully as wrong assessment may disadvantage your child.

Al Fateha	
Al Ikhlas	
Al Kafirun	
Al Quraysh	
Al Asr	
Al Adiyat	
Al Qadr	
Al Sharh	
Al Shams	
Al Ghashiyah	
Al Buruj	
Al Infitar	
Al Naziat	

Al Nas	
Al Masad	
Al Kawthar	
Al Fil	
Al Takathur	
Al Zalzalah	
Al Alaq	
Al Duha	
Al Balad	
Al Ala	
Al Inshiqaq	
Al Takwir	
Al Naba	

Al Falaq	
Al Nasr	
Al Maun	
Al Humazah	
Al Qariah	
Al Bayyinah	
Al Tin	
Al Layl	
Al Fajr	
Al Tariq	
Al Mutaffifin	
'Abasa	

AGREEMENT - ALL PARENTS MUST READ AND SIGN

- I would like to apply for a place for my child at Saturday Islamic School.
- If my child is offered a place, I agree to abide by all the rules and regulations of the Governing Body of Saturday Islamic School. I have read and understood the 'fact sheet for parents and guardians'.

I certify that the information given in this form is complete and accurate to the best of my knowledge.

Signature of parent:	Date:
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Please hand-in the forms or send them by post to:
SIS, 179 Eastern Avenue, Ilford IG4 5AW
 SIS will not take responsibility for lost applications sent or delivered elsewhere.