



# **Enrollment Packet**

## **2011-2012**

**"And those who believe and whose offspring follow them in Faith, to them shall We join their offspring, and We shall not decrease the reward of their deeds in anything. Every person is a pledge for that which he has earned."**

**(The Holy Quran 52:21)**



# Islamic Academy of Burlington County

## ENROLLMENT FORM FOR 2011 – 2012

Grade Applying for \_\_\_\_\_

### **IMPORTANT DATES**

Enrollment Starts - June 15<sup>th</sup>, 2011.  
 Late Enrollment Fee after - July 25<sup>th</sup>, 2011.  
 Placement Assessment (K, Pre-K) - July 25<sup>th</sup> - 30<sup>th</sup>, 2011.  
 School Starts - September 7<sup>th</sup>, 2011.

### Enrollment Checklist:

- Completed/Signed Form
- Tuition Contract
- Birth Certificate Copy
- Immunization/Health Record
- Previous School Record

### **For Office Use:**

Date Application Received: \_\_\_\_\_ Total Amount: \_\_\_\_\_

### **STUDENT INFORMATION**

- Child's Name: \_\_\_\_\_  

Last Name,
First Name
Middle
- Date of Birth: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_
- Home Address: \_\_\_\_\_  

Street
City,
State
Zip
- Home Phone: \_\_\_\_\_

### **PARENT'S INFORMATION**

	<b>Father</b>	<b>Mother</b>
Name		
Occupation		
Cell Phone/Work Phone		
<b>Email</b>		
Primary and other Languages spoken		

### **EMERGENCY INFORMATION**

- Emergency Contact Name: \_\_\_\_\_ Relationship to child: \_\_\_\_\_
- Emergency Contact's Phone Number: \_\_\_\_\_
- Child's Primary Doctor: \_\_\_\_\_ Phone Number: \_\_\_\_\_
- Does the child suffer from any of the following Medical Conditions? (Circle all that apply)  
 Epilepsy      Diabetes      Asthma      Hearing Difficulties      Vision Impairment      Heart Disease  
 Other - Please explain \_\_\_\_\_
- List any Allergies the child has: \_\_\_\_\_

---

**OTHER INFORMATION**

1. Name of PUBLIC School District in which your child **resides**: \_\_\_\_\_
2. Has the child been enrolled in any school before? Y/N \_\_\_\_\_  
If Yes, then School's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
School Phone Number: \_\_\_\_\_  
Reasons for leaving previous school: \_\_\_\_\_  
\_\_\_\_\_
3. Has the Child ever been suspended, expelled, or received any disciplinary action in school? If YES, describe which grade and why? \_\_\_\_\_  
\_\_\_\_\_
4. Has your child ever repeated a grade? \_\_\_\_\_ If yes, which grade and why? \_\_\_\_\_
5. Has your child been referred and tested for any of the following:  
a. Learning disabilities    b. Language processing    c. ADHD/ADD    d. Emotional difficulties  
Please submit a copy of most recent test result.  
Please explain \_\_\_\_\_
6. List any extracurricular school activities your child has participated in during the last school year, e.g. Masjid activities, sports, or special programs- \_\_\_\_\_
7. The child lives with:  
Both Parents      Father      Mother      Other \_\_\_\_\_
8. Please list ALL the Child's siblings (Name, Age/Grade)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Please share your reasons for applying to the Islamic Academy of Burlington County  
\_\_\_\_\_

**I have provided accurate and truthful information, to the best of my ability, on this application for admission. I understand and agree that the admissions process cannot be completed until IABC has received all required documents related fees.**

**Parent/Guardian's Signature: X** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Guardian's Signature: X** \_\_\_\_\_ **Date:** \_\_\_\_\_



## Islamic Academy of Burlington County 2011-2012 Tuition Rates

### Enrollment Fee for New Students

	Date Due	Amount
<b>School Enrollment Fee</b>	With Forms, August 1 <sup>st</sup> 2011	\$300
<b>Late Enrollment Fee</b>	After August 5 <sup>th</sup>	\$300 + \$100
Supplies list will be provided to parents by August 5 <sup>th</sup> 2011.		

Enrollment/Registration Fee covers all material cost including textbooks, workbooks and manuals.

### Annual Registration Fee for Pre-Enrolled Students

	Date Due	Amount
<b>Annual Registration Fee</b>	With Forms, July 25 <sup>th</sup> , 2011	\$200
<b>Late Registration Fee</b>	After August 1 <sup>st</sup> , 2011	\$200 + \$50

### Tuition Schedule

Grade	Monthly Tuition
Pre-K	\$325.00
K – 5 <sup>th</sup>	\$325.00

### Sibling Discounts for Families with More Than One Child Enrolled

First Child Enrolled	Full Tuition Rate
2nd Child Enrolled	\$250 Monthly
Each Additional Child	\$150 Monthly

#### Parents' Financial Obligations:

1. Tuition for the first month must be paid before the first day of school.
2. Beginning with the month of October, tuition is due at the beginning of each month and no later than the **5<sup>th</sup> of each month**.
3. **Please note that tuition is not based on days in school.** The full fee for each month is due from September through June. Ramadan, Eid holidays, and other days off do not reduce the tuition. The same is true for extended family trips taken at any time during the school year.
4. Transportation to and from the school is not provided by the school. New Jersey residents living 2-20 miles from the school are eligible for **reimbursement from the state ~ \$900 per year per student**.
5. Lunch, Snacks, School Field trips and School Supplies are the responsibility of the parents.

#### Discounted Rate for Eligible families:

In order to accommodate families with low income that are interested in tarbiyah for their children in an Islamic manner, if they meet the eligibility criteria, will be offered a discounted rate of \$250 / month for 10 months, with an Enrollment fee of \$200.

#### Teacher's Discount:

All full-time teachers will be offered a 50% discount on their own children's Tuition Fee. However the Enrollment fee will still apply in full.



# Islamic Academy of Burlington County

## Parent's Contract for the School Year 2011-2012

	Name of Enrolled Children	Grade	Enrollment Fee	Monthly Tuition Fee
1.				
2.				
3.				
4.				
	<b>Total</b>			

I, \_\_\_\_\_, have read all of the Rules and Regulations of Islamic Academy of Burlington County (IABC) and witness by my signature that I accept and will abide by these Rules and Regulations.

I fully accept my financial obligation of Monthly Tuition of \$ \_\_\_\_\_ from **September through June**, plus Total Enrollment Fee of \$ \_\_\_\_\_ to IABC. I understand that I may withdraw my child from school at any time and that payments made during the month of withdrawal will not be refunded to me. Also, tuition due at the time of withdrawal will still be owed to the school.

I agree to abide by the rules of IABC, including:

1. My child will attend school on a regular basis and will be on time.
2. I will work with my child at home as needed and will make sure all home assignments are completed.
3. I will make myself available to volunteer at School (schedule permitting).
4. My child will be taught the importance of following the Quran and the Sunnah of the Prophet Muhammad SAWS at school and at home.
5. I agree to accept the decision of the school administration as final in case of any disputed matter.
6. I will not, under any circumstances or for any reason, bring legal proceedings against IABC, Masjid Shuhada, nor any staff or board member of either organization.

Name of Parents/Guardian: \_\_\_\_\_

Signature Parents/Guardian: \_\_\_\_\_ Date \_\_\_\_\_

Office Notes \_\_\_\_\_

For any Questions/Comments/Suggestions please contact Br. AbuSameer at [islamicacademyburlingtoncounty@gmail.com](mailto:islamicacademyburlingtoncounty@gmail.com) or (609)439-6320, Jazakallah.