



Enrollment Packet

2024-2025

"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, Inc.

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2024 – 2025 Fee Schedule

(Non-Refundable) New Enrollment Fees (not currently enrolled)

Application Fee - due with application	\$100 per applicant
Construction/Facility Fee* - due upon acceptance	\$1,000 per family
Registration Fee - due upon acceptance	\$1,000 per student

(Non-Refundable) Re-enrollment Fees (currently enrolled)

Construction/Facility Fee*	\$1,000 per family	
Registration Fee	On or before February 15 th , 2024	\$250 per student
	On or after February 16 th , 2024	\$500 per student
<ul style="list-style-type: none"> All Previous Tuition MUST be paid before registering for the upcoming Academic Year. All Volunteer Hours or payment in lieu of the Volunteer Hours must be completed. 		

*Construction/facility fee will be waived for families that have contributed a minimum of \$1,000 towards the 2023-24 fundraising campaign.

Annual Tuition Fee (per student)

Grade		Annual Tuition Fee	Installment Schedule:
Early Childhood (Pre-K I & II)	Each Child	\$5,950	25% due <i>September 1st</i> 50% due <i>November 1st</i>
KG – 12 th	1 st Child	\$5,450	75% due <i>January 1st</i> 100% due <i>March 1st</i>
	2 nd Child	\$4,950 (9.2% discount on 2 nd child)	3% Discount if paid in-advance for the School Year.
	Each Additional Child	\$4,000 (26.6% discount on each additional child)	

Volunteer Hours Requirement

Each family is required to **volunteer at the school a minimum of 50 hours** from Sept. 2024 to May 2025 **OR contribute** in lieu of the volunteer hours **a minimum of \$500**.

Parents' Financial Obligations:

- Suspension Notices** will be issued 5 days after the installment is due.
- Please note that the Tuition is not based upon the days in school. The contract is an **annual contract**. Ramadan, Eid holidays, and other days off do not reduce the tuition.
- Tuition will not be reduced for extended family trips taken at any time during the school year. (Family trips are highly discouraged during the school year).
- 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 their townships ~\$900 per year per student in qualifying School Districts (those that provide transportation for the students of that district).**
- Lunch, Snacks, School Field trips and School Supplies are the responsibility of the parents.
- Parents are also responsible for **all Standardized Testing Fees** and all associated academic services purchased by the school.



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ENROLLMENT FORM FOR 2024 – 2025

Grade Applying for _____

For New Applicants Only

IMPORTANT DATES

Enrollment Starts	-	January 1 st , 2024
Placement Assessment for New Enrollee	-	Starts Jan. 22 nd , 2024
Family Interviews (After Acceptance)	-	Starts Mar. 1 st , 2024
School Starts (tentative date)	-	September 4 th , 2024

Enrollment Checklist:

- Completed/Signed Form _____
- Parents Questionnaire _____
- Birth Certificate Copy _____
- Immunization/Health Record _____
- Previous School Record _____

For Office Use: Date Application Received: _____	Assessment Date: _____
Acceptance/Rejection Letter Sent (Date): _____	Parents Interview Date: _____
Tuition Contract Completed (Date): _____	Total Amount Paid: _____ Check #: _____

STUDENT INFORMATION

1. Child's Name: _____

Last Name,
First Name
Middle
2. Date of Birth: _____ Gender (M/F): _____ Grade Applying for: _____
3. Home Address: _____

Street
City,
State
Zip
4. Home Phone: _____

PARENT'S INFORMATION

	Father	Mother
Name		
Occupation		
Cell Phone: <i>(Text-enabled number for School List)</i>		
Email (Primary Email where you may receive School Notifications)		
Primary and other Languages spoken		

EMERGENCY INFORMATION

1. Emergency Contact Name: _____ Relationship to child: _____
2. Emergency Contact's Phone Number: _____
3. Child's Primary Doctor: _____ Phone Number: _____
4. 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 _____
5. 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? Yes No

If so, 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 so, describe which grade and why? _____

4. Has your child ever repeated a grade? Yes / No | If yes, which grade and why? _____

5. Has your child been referred and tested for any of the following:

Learning disabilities Language processing ADHD/ADD 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:** _____