



# Al Salam Academy

## PRE - PRIMARY

(TO EMPOWER OUR STUDENT TO ACHIEVE SCHOLASTIC AND ISLAMIC EXCELLENCE)

### REGISTRATION FORM

Form No / Year: \_\_\_\_\_ / \_\_\_\_\_

1) Please fill all the information correctly in CAPITAL LETTERS.

2) Tick ( ) the appropriate boxes.

#### General Information

Child Name:	Surname	First Name	Middle Name	
Date of Birth:(dd/mm/yyyy) :	/	/		
Age (as on June _____):	Years	Months		
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female		
Place of Birth :				
Religion / Cast				

#### Academic Information

Past School Attended :
Medium of Instruction :
Current Grade :

Admission wanted in Grade: \_\_\_\_\_

#### Sibling's Information (Studying in same school)

Name:	Surname:	First Name:	Middle Name:	Class:
Name:	Surname:	First Name:	Middle Name:	Class:
Name:	Surname:	First Name:	Middle Name:	Class:

#### Parents Information

Father's Details	Mother's Details
Name :	Name :
Date of Birth (dd/mm/yyyy) : / /	Date of Birth (dd/mm/yyyy) : / /
Nationality :	Nationality :
Academic Qualification :	Academic Qualification :
Occupation / Designation :	Occupation / Designation :
Mobile No.	Mobile No.
E-mail :	E-mail :
Office Address :	Office Address :
Off. Tel.	Off. Tel.
Annual Income :	Annual Income :
Residence Address :	

**Certificate from parents**

I hereby certify that to the best of my knowledge, the information given above is correct. I fully understand that the institution accepting the registration form of my ward is not in any way, obliged to grand admission. I also agree that the decision of the principal regarding admission will be final and binding on me

I am fully aware that your institution is run purely on unaided basis and I willing contribute my mite by voluntary help in kind and/or creative suggestions, if any, directly to the managing authorities whose decision will be accepted as final and bonding.

Kindly grand admission to my child/ward in your school and I am seeking this admission according to my own decision. I am ready to abide by all the rules and regulations of your institution during the schooling of my child as in force from time to time and will pay all the fees and other dues always in time.

\_\_\_\_\_

Date

\_\_\_\_\_

Father's Signature

\_\_\_\_\_

Mother's Signature

**Information**

- 1) The application made here does not, in any way, entitle the candidate to be admitted to the institution.
- 2) Short-listed candidates will be informed by email/ phone/ post.
- 3) Kindly note that due to limited seats, it will not be possible to admit all applicants.
- 4) A 3 months notice needs to be given to the institution in case the name has to been withdrawn -
- 5) Fees once paid is non refundable and non transferable.

**Indemnity Bond**

In the event of any injury or harm during the course of the stay of my ward in the institution, I shall not hold the institution or authorities responsible for the same. Also, I understand that 3 months notice needs to be given to the institution in case I wish to withdraw my child. I understand that in such a case fees is non refundable.

\_\_\_\_\_

Signature of Parents / Guardian

If staff child, please mention the name of the staff member.....