

AL-IMAN SCHOOL



2009-2010

3020 Ligon Street
Raleigh, North Carolina 27607
Telephone: (919) 821-1699 Fax: (919) 821-2988
www.alimanschool.org

Parents, this application & the below documents must be submitted at the same time as an application packet. (no exceptions)

~ \$300 non-refundable application fee per child or \$500 per family
~ Copy of Birth Certificate or Passport
~ 5 yr Physical from Doctor for KG only (4 yr physical can be turned in for kg until a 5 yr physical can be done)

~ Immunization/Shots Record
TUITION AND FEES ARE SUBJECT TO CHANGE

Mission Statement

Al-Iman School shall be guided by the Quran and Sunnah. It shall be guided in accordance with the methodology of the people of the Sunnah and Jama'ah. The school shall, through the teaching of religious and secular courses, prepare students to:

- ❖ Succeed in this life and the hereafter.
- ❖ Meet or exceed the goals and requirements of the North Carolina Standard Course of Study and the National Educational Goals.

In order to achieve these goals Al-Iman School shall:

- ❖ Provide an Islamic learning environment, which will develop an Islamic personality and foster good will among students.
- ❖ Strive to achieve excellence in education while maintaining its status as a recognized private school as outlined within the General Statutes of North Carolina.

*Al-Iman School does not discriminate against applicants based on race, color, national origin, religion, gender or age.

WAIVER OF ACCEPTANCE IF YOU ARE APPLYING FOR KINDERGARTEN

I understand that acceptance of this application is contingent upon initial screening with the kg teacher(s).

Parent's Signature: _____ Date: _____



REQUIREMENTS FOR REGISTRATION

For the 2009-2010 Academic Year at Al-Iman School

1. The student **must be five by August 31st** for Kindergarten. Students who complete five on or before December 31 may also be considered for acceptance based on the following conditions:
 - Space availability
 - Successfully passing a Psychological Evaluation administered by a certified child psychologist
 - Successfully passing a school Readiness Evaluation administered by school personnel
 - Children who turn five after December 31 will not be eligible for enrollment in Al-Iman School
2. Submit a completed admission application form. Acceptance is based upon a "first come first served" basis. Submitting an application does not reserve a space for your child. Once the school receives the completed application with all required documents, a decision for acceptance will be made.
3. Copy of Certified birth certificate, passport or similar legal documentation of birthdate.
4. Copy of Social Security Card
5. **A non-refundable application fee of \$300. (*Registration Fee subject to revision)**

6. Kindergarten and First Grade Health Requirements

An updated immunization record. Medical evidence of the following immunizations must be submitted. (See your child's physician for state mandated updates or changes.)

- ✓ Five (5) doses (diphtheria, tetanus, and pertussis). If the fourth dose (booster) is given on or after the fourth birthday, the fifth dose is not required.
- ✓ Four (4) oral polio vaccines doses (OPV), one of which must be a booster given on or after the fourth birthday. If the third dose is given on or after the fourth birthday, the fourth dose is required.
- ✓ Two MMR (measels, mumps and rubella) doses with the first dose is given on or after the first birthday and a second dose given before entering school.
- ✓ At least one dose of Maemophhiilus influenzae b (HbOC, or PRP-OMP), given on or after the first birthday and before five years of age.

North Carolina law requires that a kindergarten health assessment be completed on or before the first day of school before a child can enter kindergarten. The health assessment must be completed no more that 12 months prior to the date of entry. Physical examination forms are available at your doctors office or the Wake County Health Department. Parents whose children do not have a regular doctor can get health assessments and immunizations through the Wake County Health Department.

7. Certified copies of the most recent transcripts and school reports from previous schools or the completion of **"REQUEST FOR RELEASE OF PREVIOUS SCHOOL RECORDS"** in the application package.

RESTRICTIONS

1. All new students may be tested to assess their command of the English language. Acceptance may be influenced by the test results.
2. After accepting a child, if it is determined that he/she has inadequate familiarity with the English language, the child may be asked to transfer to an ESL program as such programs are not available at Al-Iman.
3. Children with emotional problems, severe learning disabilities, etc., can not be accepted at Al-Iman school as programs are not available to meet the needs of these children.
4. After accepting a child, if it is determined that he/she has emotional or behavioral problems and/or severe learning disabilities, etc., the child may be asked to leave after professional consultation has taken place.



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BASIC RULES FOR PARENTS

It is hereby understood that the education of my child is a joint effort between Al-Iman School and my family. Therefore, as a parent (or guardian) of:

Student's Name (Please print clearly.)

I assume, Insha'Allah, total responsibility for ensuring the following:

1. I will become aware of and understand school policies and regulations. These will be updated throughout the school year.
2. I will make sure that my child(ren) are properly prepared for school each day:
 - In the proper school uniform which shall be purchased from the AL-Iman School uniform store. This includes proper footwear, head wear and physical education attire on PE days.
 - Arrive/leave the school on time.
 - Bring the proper school supplies to school daily.
 - Be well-rested and well-prepared for class daily.

3. I will make certain that my child(ren) completes all homework and school projects fully.

4. I agree to make regular payments of tuition no later than the 1st of each month.

I understand that a \$10* late charge will be added if payment is not made by the 1st of each month, and that if payment is not made by the 14th of each month this may result in the immediate suspension of my child.

I understand that a penalty fee of \$20.00* will be assigned to any returned checks.

I also understand that report cards and other official school transcripts **will not be distributed until the tuition has been completely paid.**

5. In case of absence due to illness or family emergencies, I will notify the school office by sending a written note. Furthermore, I understand that **fees will not be refunded** for classes missed due to absence.

6. I agree to pay the annual, non-refundable Educational Materials and Supply fee and to pay any fines assessed for lost and/or damaged books and other school materials as the need may arise.

***7. I agree to purchase all school uniforms worn by my child(ren) from the Al-Iman school uniform supply store. To send my student to school dressed in a proper uniform daily.**

I further understand that in the event of my child withdrawing or transferring to another school, transcripts from Al-Iman School will be withheld until all past due fees, fines and tuition are settled.

By signing this application, I agree to abide by the policies and regulations of Al-Iman School. To the best of my knowledge, the information I have given is true. I understand that any misrepresentation of facts on this application may be cause for refusal of admission, financial aid, cancellation of admission, or suspension from the school.

Signature of Parent (or Guardian): _____ Date: _____

*** Fees subject to change**



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STUDENT BILINGUAL SURVEY

Name of Student: _____ Grade Applying for: _____
Last First Middle

Parents Native Country: _____
Father Mother

Parents Native Language: _____
Father Mother

What language is most often spoken by parents in the home? _____

QUESTIONS APPLY TO THE STUDENT ONLY

1. What is the first language your child learned to speak? _____
2. What language is most often spoken to the child in the home? _____
3. What language does your child speak most often? _____
4. Besides languages studied in school, does your child speak any language other than English?
If so, what language? _____
5. Which one of the following categories best describes your child? *Mark one only.*
 - Speaks only a language other than English *Please note that language _____
 - Speaks mostly a language other than English *Please note that language _____
 - Speaks English and another language equally well
 - Speaks mostly English
 - Speaks only English

I hereby testify, to the best of my knowledge, that the above information is correct and accurate.

I fully understand that English is the instruction language at Al-Iman School, and that it is essential for my child to have adequate command of the English language in order to perform well.

I also understand that if my child is shown to have difficulties because of inadequate familiarity with the English language, then Al-Iman School may ask that the child be withdrawn and placed by parents in an ESL program (English as a Second Language). I do understand that Al-Iman School **does not** have an ESL program.

Signature of Parent: _____ Date: _____



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Application for Admission

**Please Be Aware That Your Child Will Not Be Enrolled Until We Receive All Required Documents:
School Transcripts, School Report Cards From All Previous Grades, School Test Scores,
Birth Certificate, Social Security Card, Shot Records, Recent Health Records**

Grade for 2009 – 2010 _____

Have you previously applied to Al-Iman? _____ Have you ever been enrolled at Al-Iman? _____ (year)

Name of Student: _____
Last First Middle

Address: _____
Street Address City State Zip Code

Telephone Number: (____) _____ Email Address (REQUIRED): _____
Area Code

Date of Birth: _____ Place of Birth: _____
Month/Day/Year City State/Country

Names of Parents: _____
Father Mother

Occupation: _____
Father Mother

Work Phone #: _____
Father Mother

Student Lives with: Both Parents Mother Father Others _____

Name(s) and Grade(s) of Siblings attending Al-Iman School: _____

Country of Origin: _____ Citizenship: _____

Medical History

Does the student have any medical problems which the school should be aware of ?

Yes No If yes, explain: _____

Is the student on any type of regular medication?

Yes No If yes, explain: _____

Does the student have any allergies to specific food or medications?

Yes No If yes, explain: _____

*Is this a special needs student? _____ Does the child have a current IEP? _____

*Does this student have ESL needs? _____ Explain _____

Does the student have Health/Medical Insurance ? Yes No
If yes, Company: _____ Policy #: _____ Group #: _____

In the event that a medical emergency arises and you cannot be reached, do you authorize Al-Iman School to undertake the steps necessary for treatment of your child? _____



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STUDENT EMERGENCY FORM

Name of Student: _____ Grade: _____

Address: _____
Street Address City State Zip Code

Telephone #: _____ Date of birth ____/____/____

In case of emergency, illness or accident to the child, or in case of immediate suspension or expulsion of the child, Al-Iman school is authorized to contact the persons listed below in the order indicated:

Parents: _____
Father's Name Mother's Name

Home Phone #: _____
Father Mother

Work Phone #: _____
Father Mother

If neither father nor mother can be contacted, call:

Name: _____ Relationship: _____ Phone: _____

Child's Doctor: _____ Phone: _____

Office Address: _____

Child's Dentist: _____ Phone: _____

Office Address: _____

Does the child have special medical conditions or diseases? _____

I hereby agree that Al-Iman School may authorize the physician of its choice to provide emergency care in the event that neither I nor the family physician can be contacted immediately.

Signature of Parent: _____ Date: _____



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REQUEST FOR RELEASE OF PREVIOUS SCHOOL RECORDS

Note to Parents/Guardian

Please complete this form and we will send it directly to the last school attended by your child.

PREVIOUS SCHOOL ATTENDED WAS: () PRIVATE () CHARTER () MAGNET () PUBLIC () HOME SCHOOL

I hereby authorize the:

Previous school attended _____

Previous school Address _____

Phone Number _____ Fax Number _____

to release pertinent information from the record of: _____
(Name of the Student)

with a date of birth of _____ to Al-Iman School.

I understand that the information released will remain confidential.

Signature of Parent: _____ Date: _____

Note to Previous School: A request has been made to Al-Iman School to provide educational services for the above-named student. We request that you provide from your files all material that might be helpful in working with this student.

Copies of the following school information are hereby requested.

1. Grade records or official school transcripts
2. A copy of all psychological evaluations, including the following test scores:
 - a. Group and Individual Intelligence Tests (include Profile Sheet)
 - b. Achievement Test Reports
 - c. Any other tests given
3. Individual Education Plan or similar plan (if applicable)
5. Health Records
6. Attendance Records
7. Transfer Record
8. Dated samples of the student's work or student portfolio

Please send copies of such information material to:

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TUITION AND OTHER FEES

(Updated 5-17-2007) by the Al-Iman School Committee)

***Tuition for the academic year 2009 - 2010 applies to all students at Al-Iman. The new fee schedule will be announced at a later date:**

2009-2010 Tuition and Fees Ten payments (discount applies for more than one child per family)

Grade	1 st Child	2 Children	3 Children	Family Cap	Option Info
KG – 5 Yearly Tuition	\$4,600.00 *	\$8,650.00 *	\$12,700.00 *	\$13,250.00 *	The parents have the option to pay the tuition in 10 installments
6 th – 8 th Yearly Tuition	\$4,850.00 *	\$9,150.00 *	\$13,400.00 *	\$13,950.00 *	

** Tuition is subject to change*

Education Materials and other fees

Elementary School \$300.00 (One Time Per Student)

Middle School \$320.00 (One Time Per Student)

**Student uniforms must be purchased from the Al-Iman uniform store*

Tuition/Fees Policies:

1. Tuition is due first of the month.
2. Tuition can be paid by the semester or the year.
3. 1st Installment of the Tuition and Educational Materials are due on July 1st, 2009.
4. A \$20.00 late fee will be charged if payment is not made by the 7th of each month.
5. A \$30.00 penalty is applied to all returned checks.
6. Payments that are not made by the 7th of the month may result in the immediate suspension of the student.
7. No child will be re-enrolled to the school if there is an outstanding tuition from the previous year.



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How did you hear about Al-Iman School?

Please help us develop more effective advertising methods by giving the following information.

Name of Parent: _____

City & State you currently live in: _____

Grades you are applying for (Check all that apply)

Prek KG 1st 2nd 3rd 4th 5th 6th 7th 8th

How did you hear about us?

- Business Link Directory
- Yellow Pages
- Online Search
- Friend or Relative (name) _____
- Other (please describe) _____

What are your reasons for applying at Al-Iman School? (check all that apply)

- I want my child to learn Arabic
- I want my child to memorize the Quran
- Academic Excellence of the school
- I want my child to be in an Islamic Environment
- Other (please describe) _____

Jazakum Allahu Khairun for your time and input!



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TUITION AUTOMATIC WITHDRAWAL FORM 2009-2010

Student Name(s) & Grade(s): _____

Parent(s) Name(s): _____

Email Address: _____

Home Address: _____

City: _____ State: _____ Zip: _____

I authorize automatic monthly deduction for my kid(s) tuition for the following amount:

\$ _____

Date of Deduction (5th): _____ * # of months: _____

Starting which month?: _____

By signing below I acknowledge that I have read, understood and completed this form and that I have authorized the deduction of a specified amount from my account for direct deposit into the account of Al-Iman School.

*****PLEASE INCLUDE A VOIDED OR CANCELLED CHECK*****

Signature: _____

Today's Date: _____