

# Student Re-Enrollment Application

## Annour Academy of Fort Smith

### 2017-2018

P.O. Box 3646  
Fort Smith, AR 72913, USA  
Tel: 479-434-4059/ Fax: 479-434-4060  
[www.annour.us](http://www.annour.us)

**Instructions:** Print clearly in black or blue ink. Answer all questions. Sign and date the form.

### Admissions Policy

***Each family must submit a non-refundable, early bird of \$75.00 re-enrollment fee for each student by February 28<sup>th</sup>, 2017. A late re-enrollment fee of \$150.00 per student after February 29<sup>th</sup>, 2016***

### Admissions Criteria:

- 1) Acceptance and commitment to the mission statement.
- 2) Academic history based on previous school records (if applicable).
- 3) Successful completion of admissions test (if applicable).
- 4) Evidence of a history of positive school behavior.
- 5) Approval based on interview conducted by the Principal.
- 6) Student must be 2 ½ years old by August 1<sup>st</sup> of upcoming year and
- 7) 100% bathroom trained.

### Admissions priority will be given based on the following criteria:

- 1) Having a parent who is a staff member.
- 2) Having a sibling that is currently enrolled (must not have an outstanding balance).

### Mission Statement

Annour Academy is a full-time, Islamic school established for the sake of **Allah** (SWT) to provide an Islamic educational environment. This educational choice strives to provide the highest academic standards in all subjects with a special focus on the Qur'an and Sunnah of **Prophet Muhammad** (SAW). Annour Academy's mission is to graduate a generation of Muslims who:

- Have a solid understanding of Tawheed (oneness of the Creator),
- Have a strong Islamic moral character,
- Have leadership skills and Taqwa (piety),
- Have a strong sense of responsibility and realize that Islam is a way of life,
- Interact with community and global issues with an Islamic frame of mind, and
- Are academically equipped to succeed and excel in an increasingly competitive and challenging world.

**\*\*Annour Academy is an equal opportunity that does not discriminate on the basis of race, color, national origin, sex, disability, or age.**

**STUDENT'S Information**

Today's date: \_\_\_\_\_

First Name Middle Name Last Name

Birth Date (month/day/year) Social Security Number (very important)  
Male/Female

Home phone number (including area code)

Home Address City State Zip

Last school attended/current school Phone Number of school (including area code)

Address of last school attended/current school City State Zip

- Circle the grade level at which the student is expected to enroll:  
**Pre-K 2 ½ years Pre-K 3 Pre-K 4 K 1 2 3 4 5 6 7 8 9 10**

- What language is spoken most frequently at home? \_\_\_\_\_
- Has the student ever been subject to major disciplinary action (suspension, dismissal, probation)?

*Please explain*  
\_\_\_\_\_  
\_\_\_\_\_

- Has the student been under any continuing care for any physical or emotional difficulty?

*Please explain*  
\_\_\_\_\_  
\_\_\_\_\_

**FATHER'S Information**

First Name Middle Name Last Name

Home phone number (including area code) Cell phone number

Home Address City State Zip

E-mail address Work phone number

Employer Employer's address

**MOTHER'S Information**

First Name	Middle Name	Last Name	
Home phone number (including area code)		Cell phone number	
Home Address	City	State	Zip
E-mail		Work phone number	
Employer		Employer's address	

**LEGAL GUARDIAN'S Information (if applicable)**

First Name	Middle Name	Last Name	
Home phone number (including area code)		E-mail address	
Home Address	City	State	Zip
Cell phone number		Work phone number	
Employer		Employer's address	

**PICK-UP contacts**

- Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
- Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
- Name \_\_\_\_\_ Relationship \_\_\_\_\_

**EMERGENCY contacts (Other than parents)**

- Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
- Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_
- Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Daytime Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**IN CASE OF ACCIDENTS:**

- Call ambulance: YES NO
- Which hospital should the student be transported to: \_\_\_\_\_ Sparks Regional Medical Center  
\_\_\_\_\_ St. Edward's Mercy Hospital

**Student EMERGENCY Information**

Medical Information - Please answer **YES** or **NO** in each section.

Medications	Limited activity	Hearing problems	Seizures	Vision problems	Contact lens	ADHD
Heart problems	Diabetes	Asthma	Allergies to medication	Allergies to bee stings	Allergies to food	Other

- Has this student ever had psychological testing or been screened for academic difficulties or learning disabilities?      YES\_\_\_\_\_      NO\_\_\_\_\_

    If YES, would the results be made available to Annoor Academy? YES\_\_\_\_\_      NO\_\_\_\_\_

- Is there any other medical information that Annoor Academy should be aware of?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

- Family physician\_\_\_\_\_ Phone\_\_\_\_\_
- Family dentist\_\_\_\_\_ Phone\_\_\_\_\_

**Circle either do or don't:**

I (**do / do not**) give permission to administer acetaminophen' I understand that I will be notified if the medication has been administered'

I do give consent for my child to receive or medical aid as may be deemed necessary and expedient by a duly licensed or recognized physician or surgeon in case of an emergency when the parent cannot be reached. I also give consent to transport my child for emergency medical treatment if the parent cannot be reached.

I understand that I must provide a current copy of my child's immunization record within 15 days of enrollment.

I have been informed that my child may be subject to interviews by DHS licensing staff, child maltreatment investigators, and/or law enforcement glacial for the purposed of determining licensing compliance or for investigative purposes and that child interviews do not require parental notice or consent.

I understand that licensing compliance forms are available for review upon requirement. If my child is 3 or 4 years old, I have been given a copy of "Getting Ready for Kindergartens calendar' I understand that no physical punishment shall be administered to children. I understand that time-out will not exceed my child's age (e.g., no more than three minutes for a three-year old), and that. Only redirection (not time-out) will be used for children under the age of two.

I understand that I may ask for a conference with the caregiver as needed.

Comments: \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

**STUDENT'S TUITION & FINANCIAL AGREEMENT**

\_\_\_\_\_  
**First Name** of Parent/ Guardian responsible for tuition      **Middle Name**      **Last Name**

\_\_\_\_\_  
Home phone number (including area code)      E-mail address

\_\_\_\_\_  
Home Address      City      State      Zip

\_\_\_\_\_  
Cell phone number      Work phone number

**Name of siblings attending Annoor Academy**

- 1. Name \_\_\_\_\_ Grade \_\_\_\_\_
- 2. Name \_\_\_\_\_ Grade \_\_\_\_\_
- 3. Name \_\_\_\_\_ Grade \_\_\_\_\_
- 4. Name \_\_\_\_\_ Grade \_\_\_\_\_
- 5. Name: \_\_\_\_\_ Grade \_\_\_\_\_

**ANNUAL TUITION INFORMATION**

**7:30 AM – 3:35 PM**

**Tuition paid full or in 10 months (3% off if full tuition paid on first day of school)**

**Pre-K 2 ½ (30 months) and 3 years old (100% bathroom trained)**

Half Day 7:30AM- 11:30AM	Full Day 7:30AM- 3:35Am
\$2,875.00	\$5,750.00

**Prek-4yr. old through 2<sup>nd</sup> Grade Monthly Payments**

1 <sup>st</sup> student	2 <sup>nd</sup> student 5% Reduced	3 <sup>rd</sup> student 5% Reduced	4 <sup>th</sup> student 10% Reduced	5 <sup>th</sup> student 10% Reduced
\$575.00	\$546.25	\$546.25	\$517.50	\$517.50

**3<sup>rd</sup> Grade through 12<sup>th</sup> grade monthly Payments**

1 <sup>ST</sup> student	2 <sup>ND</sup> student 5% REDUCED	3 <sup>RD</sup> student 5% REDUCED	4 <sup>TH</sup> student 10% REDUCED	5 <sup>TH</sup> student 10% REDUECED
\$625.00	\$593.75	\$593.75	\$562.50	\$562.50

**ONE TIME**

**BOOK/MATERIAL FEES: \$350.00**

**Events: \$65.00**

**Kindergarten through 2nd Grade: End of Year Assessment: \$40**

**Third through 9th grade: End of Year Assessment: \$30**

The difference in the cost of each student is being paid for by a few members in our community through donations (sadaqah). The school is asking those families whose income is between **\$60,000.00 and \$100,000.00** to donate **monthly** per each of their student/s between **\$50.00 to \$250.00**. Families whose income is **greater than \$100,000.00**, please **donate monthly \$325.00** per each of your students. Whatever you pay over the base tuition is considered a donation and is tax deductible, Insha’a Allah.

Once a student has registered, the parents are responsible for the payment of any assessed fees. A statement of tuition, student fees and other balances owing must be paid on regular basis; however, **payment is due regardless of whether or not a statement has been received.**

Failure to make payment by the stated deadline will result in the withholding of future services by the school and in some cases may result in the termination of student status.

Withholding of future services means that students will not receive transcripts and they may not be eligible for re-registration until all overdue accounts have been cleared with the school. The school services may also be withheld for overdue amounts and may result of not transfer transcripts to other schools. **Non-payment of tuition and fees does not constitute an official withdrawal from the school.**

**Methods of Payment**

The regular hours of the Office Manager for Student Accounts and Treasury are 08:00 to 3:35PM

Monday through Friday, except for holidays. (Friday till 1:00PM)

Full cash payment, post dated checks, or Automatic Withdrawal are all acceptable methods of payment.

**PLEASE NOTE:** The above posted tuition fees HELP support the following yet do not cover the school budget:

1. Books, computers, furniture, etc.
2. School staff salaries.
3. Building insurance.
4. Classroom budget for teachers' aides, library books, audio visual programs.
5. Maintenance of the school building and grounds.
6. Utility bills.
7. Janitorial services.

**Agreement Terms and Conditions:**

1. **\$75.00 re-enrollment fee for each student by February 28, 2017. A late re-enrollment fee of \$150.00 per student after February 28<sup>th</sup>, 2017.**
2. **3% off those who pay full tuition by first day of school 8/17/2017**
3. Tuition may also be paid in **10 monthly installments**, but **must** submit 10 post dated checks for the entire year's tuition to be dated as follows **Aug 1., Sept. 1, Oct. 1, Nov. 1, Dec., 1<sup>st</sup>, Jan. 1, Feb. 1, Mar. 1, Apr. 1, May 1.**
4. **Setting up automatic withdraw** of tuition monthly is another option.
5. Tuition is annual but paid in monthly installments, and parents are responsible for fulfilling this agreement till the end of the academic year. Only in the case of transfer to another State, a school committee waiver is needed to terminate this agreement.
6. Checks/automatic deductions returned by the bank due to insufficient funds must be replaced immediately. There is a **\$25.00 service charge as the bank charges us for the returned check.**
7. The school reserves the right to refuse service if the terms and conditions of this agreement are disputed or violated.
8. The school reserves the right to make changes in programs offered with one-week prior notice.

**CHILD CUSTODY POLICY**

The school will honor all current court orders, decrees, or instructions pertaining to custody situations. It is the responsibility of adults having custody of a student to submit to the school a certified copy of the most recent court order or decree.

In sole custody situations, the custodial parent has the right to determine the child's education unless the custody decree provides otherwise. Where parents share joint legal custody, neither parent's rights are superior with regard to determining the child's education unless specified otherwise by the court or parents in the final judgment or order.

Both parents, custodial and noncustodial, have equal access rights to the school records of their children unless the school or district has received a copy of a court order or decree indicating otherwise.

The school will not act merely on the desire of one parent to prevent the other parent from seeing the student.

Noncustodial parents will not use the schools to contact their children unless an emergency exists.

**We, the undersigned, have read and understood the above conditions and agree to abide by them.**

Payment option:  Pay in full on or prior to the 1<sup>st</sup> day of classes

10-month payment plan via 10 post dated checks

*(Note: 10 checks must be received on or prior to the first day of classes)*

Father's Signature: \_\_\_\_\_

Mother's Signature: \_\_\_\_\_

Guardian's Signature (if applicable): \_\_\_\_\_