



التقوى  
**AT-TAQWA MADRASAH BOYS**

11 View Street  
Overport, Durban, South Africa  
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Email: info@taqwaboys.co.za  
Website: www.taqwaboys.co.za  
PBO -930032671

## ADMISSION FORM

### Application for Admission

1. Before completing this form, please read the notes below.
2. Admissions will be subject to the Madrasah's admissions policy. You will be notified regarding the outcome of your application.
3. Kindly attach a photocopy of the learner's birth certificate as well as the parent's/guardian's Identity document to the last page of this application form.
4. In the event that your particulars change, it is your responsibility to ensure the madrasah is informed. This is crucial for communication.

### Notes

1. This form must be completed in full by the applicant's parent.
2. Parent means:
  - a) the parent/guardian of the learner
  - b) the person legally entitled to custody of the learner; or,
  - c) the person who undertakes to fulfil the obligations of a parent.
3. Where applicable, the latest school report and letter of transfer must be attached.
4. Any health, doctor, psychologist, occupational therapists etc..assessments to be attached.
5. For foreigners, kindly provide a copy of passport and work permit with any other relevant documents.
6. Failure to comply with the above may result in a delay in the processing of the application.
7. If a learner contravenes the Madrasah's Code of Conduct or any Madrasah rule or regulation laid down by the responsible authorities, disciplinary action may be taken against the learner.

### FOR OFFICE USE ONLY:

Application no: _____	Admin no: _____
Surname of learner: _____	
Name of learner: _____	
Grade applying for: _____	Year: _____
Application received on: _____	
Received necessary documents: _____	
Accepted on the following conditions: _____	
_____	
Family number: _____	Signature: _____

**Learner's Details:**

Surname:

First Name:

Second Name:

Grade applying for:

Age:

Race:

Eldest Child?

Identity number:

Date of birth:

Place of birth:

Home language:

Mode of transport:

Who does child live with?

**Contact details:**

Telephone number:

Physical Address:

City:

Province:

Code:

Postal Address: (if different from above)

City:

Province:

Postal Code:

**Details of who will pick up learner from Madrasah:**

Contact Name:																				
Contact Number:																				
Relationship:																				

**Emergency Contact details:** Persons authorised to pick up learner from school.

- Contact Name : 

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 Contact Number: 

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 Relationship: 

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- Contact Name : 

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 Contact Number: 

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 Relationship: 

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**Learner’s Medical Details:**

Doctor’s details

Name: 

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Address: 

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City: 

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Telephone number: 

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Cell number: 

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Fax number: 

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Email address: 

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**Health Particulars of Learner:**

Condition of health:	
List any relevant allergies, medical conditions, and prescribed long term medication that learner is on.	
Previous illnesses: (Date, Nature and Severity)	
State any physical defects (eg: hearing, eye sight etc..) which affects the learner	
State any learning disabilities which affects the learner	
Other Details:	

**Learner School History:**

Has the learner attended any school previously?	
If yes, list the name of the schools attended and grades completed.	

**Details of other children attending this Madrasah:**

	Name	Grade
1.		
2.		
3.		
4.		
5.		

**Father**

**Learner's Family Details:**

**Father's Details:**

Surname: 

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First Name: 

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Initials: 

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Title: 

MFT	ML	HFZ	DR	ADV.	MR	OTHER:	
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Identity number: 

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**Residential Address:**

Physical Address: 

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City: 

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Province: 

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Code: 

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Postal Address: (if different from above) 

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City: 

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Province: 

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Postal Code: 

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Email Address: 

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Occupation: 

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Employer: 

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**Contact Numbers:**

Home telephone number: 

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Work telephone number: 

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Cellphone number: 

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Contact number 1: 

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Contact number 2: 

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Marital Status	Single	Married	Divorced	Widow	Widower
Correspondence:	Post	Email			
Account Holder:	Yes	No			

Statement of account and correspondence will be sent to you.

**Mother/Guardian**

**Mother's/Guardian's Details:**

Surname:

First Name:

Initials:

Title: 

APA	HFZA	MRS	OTHER:	
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Identity number:

**Residential Address:**

Physical Address:

City:

Province:

Code:

Postal Address: (if different from above)

City:

Province:

Postal Code:

Email Address:

Occupation:

Employer:

**Contact Numbers:**

Home telephone number:

Work telephone number:

Cellphone number:

Contact number 1:

Contact number 2:

Marital Status	Single	Married	Divorced	Widow	Widower
Correspondence:	Post	Email			
Account Holder:	Yes	No			

Statement of account and correspondence will be sent to you.

**DECLARATION**

I undertake:

1. To ensure that my child/ward attends Madrasah regularly and should my child/ward be absent from Madrasah for any reason, I will notify the Principal, or Form Teacher preferably in writing, stating the reason for absence;
2. To ensure that my child/ward follows the Madrasah’s Code of Conduct and the Madrasah’s requirements and will accept sanctions imposed for violation of the Code of Conduct/Requirements;
3. To contribute to the Madrasah fees set annually;
4. To pay all costs incurred for damage done or losses caused by my child/ward to Madrasah property and equipment, and books given on loan to my child/ward.

**Indemnity:**

We, the parents of \_\_\_\_\_ accept the place offered at At-Taqwa Boys Madrasah at our own request on the following terms and conditions:

- We understand that the Madrasah has a right to cancel a child’s admission in the event of non-compliance to Madrasah rules/requirements.
- We give consent for the learner to participate in any and all activities of the Madrasah whether conducted on the premises or elsewhere and whether conducted during Madrasah hours, excursions, extramurally etc...
- We fully understand that whilst every precaution will be taken to ensure the safety of our child, we indemnify and hold harmless the school, the staff and principal against and from any or all claims of whatsoever nature brought or made against them in connection with any loss or damage to person or property of the child.
- We hereby undertake to inform the Madrasah if any person other than those mentioned will be fetching my child from Madrasah.
- We authorize the Madrasah to contact the family doctor in the event of any emergency which arises- (Allah Ta’ala forbid)
- We understand that it is the responsibility of the Parents/Gaurdians to register their child/ward with the Department of Education, or obtain any permission, concession or exemption which may be applicable. The Madrasah takes no responsibility, and indemnifies itself thereof.
- We hereby confirm that we have read and understood the ‘Requirements and considerations of the Madrasah’ as well as the ‘Admission Policy’.
- We hereby certify that the information supplied herein is true and correct.

**Signature:**

Father: \_\_\_\_\_

Mother: \_\_\_\_\_

As witness: (1) \_\_\_\_\_

As witness: (2) \_\_\_\_\_

Date: \_\_\_\_\_