



# WISE ACADEMY

## SCHOOL REGISTRATION FORM

Form #

YEAR

### PARENT / GUARDIAN INFO I - (PLEASE PRINT)

<b>FIRST, LAST NAME:</b>	
<b>RELATIONSHIP TO CHILD:</b>	
<b>PHONE NUMBER:</b>	
<b>EMAIL:</b>	

### PARENT / GUARDIAN INFO II - (PLEASE PRINT)

<b>FIRST, LAST NAME:</b>		
<b>RELATIONSHIP TO CHILD:</b>		
<b>PHONE NUMBER:</b>		
<b>EMAIL:</b>		

<b>ADDRESS:</b>	<b>ADDRESS:</b>	<b>If address is the same, leave blank.</b>
Street Address	Street Address	
City State Zip Code	City State Zip Code	

### STUDENT INFORMATION - (PLEASE PRINT)

**Number of Students Being Registered:**      1      2      3      4      5      6      **OTHER**

#### STUDENT 1

First	Middle	Last	<b>Known Allergies:</b>	<input type="checkbox"/> YES	<input type="checkbox"/> NO				
<b>Date of Birth:</b>			<b>Please Specify Allergies:</b>						
<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female									
<b>Last Grade Completed in Public School:</b>	Pre-K	KG	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	<b>Learning Accommodations:</b>	
	6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>		

Has your child attended an Islamic weekend school program before? <input type="checkbox"/> YES <input type="checkbox"/> NO	Any other information the school should be made aware of?
School Name:	
Last completed grade in the weekend school:	



STUDENT 2															
First Middle Last								Known Allergies:		<input type="checkbox"/> YES	<input type="checkbox"/> NO				
Date of Birth:								Please Specify Allergies:							
Gender:				<input type="checkbox"/> Male				<input type="checkbox"/> Female				Medical Conditions:			
Last Grade Completed in Public School:		Pre-K	KG	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	Learning Accommodations:						
		6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>	Physical Accommodations:						
Has your child attended an Islamic weekend school program before? <input type="checkbox"/> YES <input type="checkbox"/> NO								Any other information the school should be made aware of?							

STUDENT 3															
First Middle Last								Known Allergies:		<input type="checkbox"/> YES	<input type="checkbox"/> NO				
Date of Birth:								Please Specify Allergies:							
Gender:				<input type="checkbox"/> Male				<input type="checkbox"/> Female				Medical Conditions:			
Last Grade Completed in Public School:		Pre-K	KG	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	Learning Accommodations:						
		6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>	Physical Accommodations:						
Has your child attended an Islamic weekend school program before? <input type="checkbox"/> YES <input type="checkbox"/> NO								Any other information the school should be made aware of?							



STUDENT 4																	
First								Middle				Last		<b>Known Allergies:</b>		<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>Date of Birth:</b>												<b>Please Specify Allergies:</b>					
<b>Gender:</b>				<input type="checkbox"/> Male				<input type="checkbox"/> Female				<b>Medical Conditions:</b>					
<b>Last Grade Completed in Public School:</b>		Pre-K	KG	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	<b>Learning Accommodations:</b>								
		6 <sup>th</sup>	7 <sup>th</sup>	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>	<b>Physical Accommodations:</b>								
Has your child attended an Islamic weekend school program before? <input type="checkbox"/> YES <input type="checkbox"/> NO												<b>Any other information the school should be made aware of?</b>					

EMERGENCY CONTACT INFO- (PLEASE PRINT)			
In cases of emergency when the <b>parent/guardian is not reachable</b> please provide an additional contact for emergencies.			
<b>Emergency Contact I</b>		<b>Secondary Contact II</b>	
<b>FIRST, LAST NAME:</b>		<b>FIRST, LAST NAME:</b>	
<b>Relationship to Student:</b>		<b>Relationship to Student:</b>	
<b>Phone Number:</b>		<b>Phone Number:</b>	
STUDENT PICK-UP			
Please indicate if anyone other than parent / guardian will be picking up or dropping off child to school.			
<b>FIRST, LAST NAME:</b>		<b>FIRST, LAST NAME:</b>	
<b>Relationship to Student:</b>		<b>Relationship to Student:</b>	
<b>Phone Number:</b>		<b>Phone Number:</b>	



## AGREEMENT OF EXPECTATIONS

### Parental Expectations: See Handbook for Details

- Parents are responsible for dropping off and picking up their children from the school unless other drop-off / pick-up arrangements are made and indicated on the form. There is no provision for WISE Academy taking care of the children outside the school hours of 10:00 am to 1:30 pm.
- This form authorizes WISE Academy to secure emergency medical care for your child in an emergency. The parent will be responsible for all the medical charges incurred in such a situation.
- Parents and students must abide by all the policies, rules and regulations while on school premises.
- Parents will commit to ensuring that they will be involved in their child's education and will partner with the teachers and administration to assist this process.
- Dhuhur' prayer is part of the school day and it is expected for all students and parents to participate.

### Student Expectations: See Handbook for Details

- Students are expected to attend school fully prepared with textbooks (distributed by the school), notebooks, folders, pencils, pens, etc.
- Students must adhere to Islamic dress code when present at school. Including clothing that is modest, loose fitting, fulling covering, and containing no animate pictures or inappropriate words.
- Students must respect their teachers, fellow students, and school property (books, classrooms, resources) at all times.

### **Photo/Video Disclaimer:**

- WISE Academy plans to use photographs and/or videos of classrooms, students, and school events in publications, news releases, online, and in other communications related to the mission of WISE Academy.

### **Do you acknowledge and agree with the above expectations and disclaimers?**

Yes, I have read and agree with the above expectations and disclaimers. And will look to the school handbook for additional details on rules, policies, and procedures.

**Parent / Guardian Signature**

X \_\_\_\_\_

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

FOR SCHOOL USE ONLY			
	YES	NO	Initials
Application Completed:			
Tuition Paid In-full:			
Application Approved:			
Follow-up Needed:			