



15 Dale way street Kelvin
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Admin: 064 534 1956

APPLICATION FORM

You are required to complete a separate application form for each child applying at Aspiring Young Minds.

Completing this form does not necessarily mean that the learner has been guaranteed a place at the school.

DOCUMENTATION: The following documentation must be submitted with the completed application form. Kindly tick off to ensure all documentation is submitted/ acknowledged when handing in the application.

1.	Copy of official unabridged birth certificate	
2.	Latest school and Madressa report	
3.	Copy of both parents/ guardians identity documents	
4.	Proof of payment of the application fee	-
5.	Final year-end school report and transfer card	
6.	Acknowledgement of receipt of the Code of Conduct	
7.	Acknowledgement of receipt of the Fees Form	
8.	In the case where the applicant requests a discount, disclosure of THREE months bank statements of both parents	

NAME OF APPLICANT: _____

GRADE APPLYING FOR: _____

YEAR APPLYING FOR: _____

PARENT SIGNATURE: _____

APPLICATION FOR ADMISSION

Grade applied for: _____

Highest grade passed: _____

Year when grade was passed: _____

DETAILS OF LEARNER: (As per birth certificate)

Gender (male/female): _____ Date of birth: _____

Surname: _____ First name: _____

Identity number: _____ Citizenship: _____

EDUCATIONAL HISTORY OF LEARNER

Name of previous school: _____

Telephone number of previous school: _____

Has your child ever skipped/repeated a grade and why? _____

Has your child ever been recommended/received an evaluation by an educational psychologist and why?

Has your child been suspended/expelled from school and why?

LEARNERS MEDICAL INFORMATION

Doctor's name: _____ Telephone number: _____

Name of Medical Aid: _____ Medical Aid number: _____

Medical problems /Allergies: _____

Special problems requiring counselling: _____

Dexterity of learner: Right, left or ambidextrous: _____

Deceased Parent: Mother, Father or Both: _____

MOTHER/GUARDIAN DETAILS: (As per birth certificate)

Surname: _____ First Name: _____

Identity Number: _____ Title: _____

Home Address: _____

Home Tel number: _____ Cell Number: _____

Employer: _____ Occupation: _____

E-Mail Address: _____

FATHER/GUARDIAN DETAILS: (As per birth certificate)

Surname: _____ First Name: _____

Identity Number: _____ Title: _____

Home Address: _____

Home Tel number: _____ Cell Number: _____

Employer: _____ Occupation: _____

E-Mail Address: _____

NEXT OF KIN DETAILS

Surname: _____ First Name: _____

Relationship to learner: _____

Contact number: _____

Address: _____

SIBLING INFORMATION:

Brother / Sister at AYM: _____ Grade: _____

Brother / Sister at AYM: _____ Grade: _____

Brother / Sister at AYM: _____ Grade: _____

FEES

Boys, Gr 4-9 :R3500 per month

Girls, Gr 4-9 :R3500 per month

Non- Hifz girls (introducing Arabic classes that will run till 2:35) R2200 per month

Grade 1,2 and 3: R2000

Grade R : R1200

Grade RR (Full time) R 1200

Aalim and Aalimah class: R 1200

Boys full time hifz: R 1850

Girls full time hifz: R 1200

Who will settle the account:

Father, mother or guardian: _____

Monthly donation to running shortfall of the institute(optional)_____

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE, THE ABOVE INFORMATION AS SUPPLIED IS ACCURATE AND CORRECT.

Aspiring Young Minds is an offsite tuition centre and learners are registered with AYM Academy.

NAME OF PARENT/GUARDIAN (PLEASE PRINT): _____

SIGNATURE OF PARENT/GUARDIAN: _____

DATE: _____