

Al-Burhan Grammar School for Girls

Spring Road Centre, 258 Spring Road, Tyseley, Birmingham, B11 3DW Tel: 0121 - 440 - 5454 | <u>info@alburhan.org.uk</u> | <u>www.alburhan.org.uk</u>

ADMISSION FORM

Pupil is currently in:	Y6 / Y7 / Y8 / Y9 / Y10	For entry ir	nto:	Y7 / Y8 / Y9 / Y10			
PUPIL DETAILS							
Surname:		Forename(s):					
Date of Birth:	/ /	Age:	Tel (Home):			
Home address:							
		Postcode:					
Nationality:		Country of origin:					
Is the pupil "looked af	ter" by a local authority (LA)?	□ No □ Yes, by:					
PARENT'S DETAILS							
Father's name:		Occupation:					
Address (If different to pupil):							
		Postcode:					
Telephone (home):		Telephone (mobile):					
Email:							
Mother's name:		Occupation:					
Address (If different to pupil):							
		Postcode:					
Telephone (home):		Telephone (mobile):					
Email:							

*****FOR OFFICE USE ONLY*****													
Photograph receiv	red:	: Yes / No S		Sc	School report received:			Yes / No I			ID received:		Yes / No
Registration fee received: Yes / No					D	Date received:							
Entrance test date:				Attended:	Yes	s / No	R	Results: N		faths: Engli		nglish:	
Place offered:	Yes	s /	s / No / Conditional / Waiting List Place					acce	epted	: Y	(es / No		
Admission Fee paid: Yes / No Da		Date	2:	Depos		sit paid:		Yes	/ No	Date:			
A 1144													

Additional Notes:

EDUCATION HISTORY									
Name of current School:									
Address:									
Postcode:				Telephone:	Telephone:				
Date attended: From: To:									
Reason for leaving:									
Please give brief details of any previous schools your child has attended: (School, Class completed, Reason for leaving)									
Has the pupil had any behavioural issues in her previous schools? (Please circle) Yes / No If yes, please give details: Yes / No									
Does the pupil have an Education, Health and Care Plan or Special Needs? (<i>Please circle</i>) Yes / No									
MEDICAL DETAILS									
Does the pupil have any of the following? \Box No \Box Yes (<i>Circle</i>) Allergies / Asthma / Diabetes / Epilepsy						oetes / Epilepsy			
Any other medical conditions?									
Further details if yes to any of the above:									
GENERAL INFORMATION This section does not affect the pupil's application									
How did you hear about us? (<i>Please circle</i>) Internet / TV / Radio / Newspaper / Word of mouth									
Have any of the pupil's siblings attended Al-Burhan Grammar School? (Please circle)Yes / No									
If yes, please give details of the details (full name, date of birth, current class/date of leaving): Is the pupil attending a mosque/madrassah or have they done so in the past? (<i>Please circle</i>) Yes / No									
Is the pupil attending a mosque/madrassah or have they done so in the past? (<i>Please circle</i>) Yes / No									

Address:	
Which stage of Quran reading is the pupil at?	Qaaidah-Quran primer / Quran / Completed the Quran
Any additional Islamic learning/studies?	

If Yes: Name of mosque/madrassa:

STATEMENT AND DECLARATION

Is there any other information you would like to share with the school in support of your application? The above information is correct and I undertake to abide by all the School regulations. I understand that giving false information may affect the offer of a place. Parent/guardian's signature: Date:

Please return the completed form along with the documents below and a non-refundable registration fee: A photograph | Latest school report | Copy of birth certificate or ID page of passport | £50 registration fee