

Al Aziz Academy UK Ltd Adult Classes Admissions Form

Information about the student:

Name: _____

D.O.B: _____

Age: _____

Gender: Female/Male

Occupation: _____

Level of Education : _____

First Language: _____

Second Language: _____

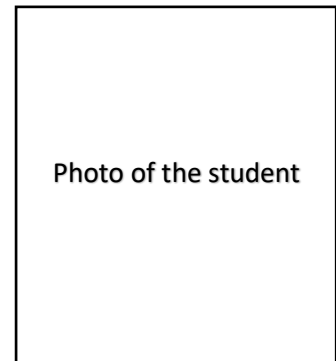
Address: _____

Postcode: _____

Mobile: _____

Email : _____

Receiving Income Support /Benefits ? Yes/No



Medical Information:

Do you suffer from any of the following?

Asthma: Yes/No

Allergies: Yes/No

If the answer to allergies is yes, please give clear details i.e. peanuts, plasters, milk etc and provide us with a doctor's letter detailing the medical condition.

Do you have a speech incapacity due to a medical condition? Yes/No

Or have ever been referred to a speech therapist? Yes/No

Do you have any special needs i.e. learning difficulties for which you have been diagnosed , that might impact your learning of the Arabic language e.g. Autism? Dyslexia ?

Information about Emergency Contacts (next of kin)

Titles	Emergency Contact 1	Emergency Contact 2
Forename		
Surname		
Occupation		
Home No.		
Mobile		
Email		
House No. and Street		
Town/City		
Post Code		

Extra Information about your Arabic Capability :

Can you speak Arabic ? Yes/No (Please circle) a little, a fair amount , fluently , not at all

Do you know the Arabic Alphabet? Yes/No(Please circle)

Can you read Arabic? Yes/No (Please circle) Beginner Intermediate Advanced

How would you describe your reading capability? (Please circle) Beginner Intermediate Advanced

Can you understand what you read ? (Please circle) Yes (some) , Yes (mostly), Yes (All) / No

Can you write Arabic ? (Please circle) Yes / No

Please add any information that might help you application. Tell us about your level of Arabic and what you hope to gain from the course for which you have signed up

Photography and Informed Consent :

I give/ do not give (please cross as appropriate) my consent to be photographed (picture and video) for school records and activities.

By filling in this application you AGREE to the following terms:

1. To attend punctually and consistently all the classes for the course for which I have signed up between 11-1PM or 1-3PM during term time (every Sunday (on school days) unless a holiday is confirmed. Please ensure you come to classes with all necessary books, equipment and snacks.
2. To inform the Head teacher about any absence. All attendance will be registered on the day
3. To pay all fees in advanced of each term. I understand Fees once paid are non-refundable.
4. To ensure you follow AAA UK Ltd Student Code of Conduct whilst on the school premises.
5. To follow AAA UK Ltd and Parkwood Academy Health and Safety regulations at all times whilst on the school premises
6. That neither the school nor AAA UK Ltd will be held responsible for any injuries sustained due to accident/natural causes whilst on school premises.
7. That you will lose your place in class if absent for three consecutive weeks without informing the head teacher.

I agree to the terms stated above;

Name _____

Signature _____

Date _____