Attach colour photograph here

We require photograph to identify the child

Dawat e Islami UK

Mādrasa-Tul-Madīnah Admission Form



PLEASE COMPLETE ALL SECTIONS OF THIS FORM USING BALCK INK AND BLOCK CAPITALS. INCOMPLETE FORMS WILL NOT BE PROCESSED.

Section 1 - Childs Details (We collect this information to identify the child and to send any correspondence)

First Name		Middle Name(s)			Last Name	
Date of Birth	DD/MM/YEAR	Gender	Male	Female		
House Number		Road / Street			Post Code	
Previous	Previous Mādsrassa attended					
Reason for Leaving						
Other children already studying at this Mādsrassa?						

Section 2 - Parent / Guardian Details (We collect this information to contact parents/guardians as detailed in consent section of this form)

1 st Parent/Gu	1 st Parent/Guardian Details					
First Name		Middle Name(s)			Last Name	
Relationship to child		Parental responsibility	Yes	No	Contact Details	1- 2-
2 nd Parent/G	2 nd Parent/Guardian Details					
First		Middle			Last	
Name		Name(s)			Name	
Relationship		Parental	Yes	No	Contact	1-
to child		responsibility	165	INO	Details	2-

Section 3 — Other local contacts (New safeguarding guidelines require us to have alternative contacts if parents or guardians are unavailable. These individuals will only be contacted if we are unable to get through to the parents. These individuals must know the password you have provided in this section)

	Full Name	Contact Details	Password
First			
Person			
Second			
Person			
Third			
Person			

Section 4 – GP Details (This information is required to communicate with the GP in an Emergency or as part of supporting your child's health needs)

	(This information is required to communicate with the Grant and Emergency of as part of supporting your clinic stream recus)			
Name	Surgery			
of GP	Name			
Full				
Address				
Contact				
Details				

Section 5 - Supplementary Details (we require this information as part of our Health & Safety and Safeguarding commitments)

		If yes, please provide full details
Does your child suffer from any medical conditions?	YES / NO	
Does your child have any Allergies?	YES / NO	
Does your child suffer from Learning Disabilities?	YES / NO	
Any other mental or physical health problems?	YES / NO	
Are parents separated or divorced?	YES / NO	
If yes, are there any Court Orders in place?	YES / NO	

Section (Section 6 – Additional Information (Please provide any additional information that you feel is important for the admission of your child)					

Data Protection Statement

Your data will be held securely and in accordance with the Data Protection Act 1998 (DPA), the EU Data Protection Directive 95/46/EC, the General Data Protection Regulation of the European Parliament and of the Council (GDPR), and all applicable laws and regulations relating to Processing of Personal Data and privacy, including where applicable the guidance and codes of practice issued by the Information Commissioner. You can also read our Privacy Policy, which is available at request through the headteacher.

Section 7 — Consent [Under the new General Data Protection Regulations (GDPR), we are required to have specific consent from the parents for the following statements. You have every right to withdraw your consent by circling NO and this will not adversely affect your child's admission. You must sign each statement even if you choose not to give consent.]

Please read each statement carefully and circle Yes or No followed by your s	ignatures.	SIGNATURES
Madrassa-Tul-Madinah can share my contact details with other departments		
of Dawat-e-Islami for the purpose of sharing religious information,	YES / NO	
advertising works of Dawat-e-Islami and fundraising campaigns.		
Madrassa-Tul-Madinah can take photographs or make videos of my child and		
share them for educational and promotional purposes on Madani Channel,	YES / NO	
Social Media, news articles and other social networks as appropriate.		
If my child is over the age of 10, I hereby give my express consent for him/her	YES / NO	
to walk home on their own and absolve Dawat-e-Islami of all responsibilities	IL3 / NO	
and liabilities in this regard.	N/A	

PLEASE GO TO NEXT PAGE AND SIGN THE HOME AND MADRASA-TUL-MADINAH AGREEMENT

Office Use Only				
Date form received	DD/MM/YEAR	All sections fully completed	Yes / No If no, return the form to the parents for completion	
Admission Approved	Yes / No	Meeting held with parents	DD/MM/YEAR	
Nazim(a) Signature				

Section 8 - Home and Mādsrassa-Tul-Madīnah Agreement

Parent / Guardian (To be signed by the parent / guardian prior to submitting the form)

I have read The Mādsrassa-Tul-Madīnah Handbook completely

I fully understand the policies and procedures mentioned in The Handbook

I agree to abide by all the rules and regulations mentioned in The Handbook

I confirm that all the details I have provided in the admission form are true and accurate

I will inform the Mādsrassa-Tul-Madīnah of any changes immediately in writing

Signature	Date	DD/MM/YEAR
Print	Relationship	
Name	to Child	

Headteacher (Complete this agreement during the meeting, which should be held before the child starts The Mādsrassa)

I have arranged a face to face meeting with the parent/guardian on DD/MM/YEAR

I have explained general principles to them and answered any questions from them

I will follow and deliver the commitments entrusted to us by Mādsrassa-Tul-Madīnah in this agreement.

Signature	Date	DD/MM/YEAR
Print		
Name		

Contacting Madrassa-Tul-Madinah (Headteacher should complete this section and then copy of this page should be given to the parents for their reference)

If you have any problems, queries or concerns regarding your child, or you wish to give feedback regarding this Mādrassa, please do not hesitate to contact us as below:

Name of Headteacher:	
Telephone Number:	

safeguarding@dawateislamiuk.net

Safeguarding e:mail:

I must strive to reform myself and people of the entire world

Mission statement of Dawat-e-Islami