

Toledo Islamic Academy Enrollment Application



Student Information

Name (Last, First M):	Primary Language:
Street Address:	English Ability:
City, State, Zip:	Grade Sought:
Date of Birth:	Gender: Male/Female
SSN:	Place of Birth:
Previous School District:	Is the student one of the following:
Current Grade:	A Citizen or National of the United States <input type="checkbox"/>
Current School: <small>(Students entering High School must bring transcripts to enroll)</small>	A Lawful Permanent Resident <input type="checkbox"/>
	An alien authorized to attend public school in the US <input type="checkbox"/>
Race (Circle one): Asian White Black Hispanic Native American Middle Eastern Other	
I certify that the child I am enrolling at Toledo Islamic Academy has not been previously expelled from school, nor is pending expulsion <input type="checkbox"/>	
The above named child that I am enrolling has been previously expelled from a school. I authorize access to all school records and further authorize communication with the school(s) listed below regarding this matter. I understand that my child's admission to the Toledo Islamic Academy will be at the discretion of the Academy Administration and the Board. <input type="checkbox"/>	
Parent Information	
Fathers Name (Last First)	
Address (If different from child):	
Phone:	Email:
Mothers Name:	Email:
Phone:	Marital Status:
Is there a Custody Order in Place? YES / NO/ PENDING	Have you provided a copy to the school? YES / NO
Fathers Occupation:	Mothers Occupation:
Please List the Public School District of Residence:	

Previous Schools Attended (most recent first) :				
Name of School	Address	Phone	Grade	Year(s)

Reason(s) for leaving previous school: _____

Has the student ever repeated a grade? Please explain why: _____

Has the student ever been suspended, expelled or had any disciplinary difficulty in school? If yes, please explain: _____

Does your child have any physical disabilities? If yes, please provide explanation: _____

Toledo Islamic Academy is strongly committed to meeting the needs of its students. In order to provide programs and resources to meet students' needs, TIA seeks accurate and timely information from prospective families regarding the learning history of applicants for admission.

Has your child been referred for (please check all that apply):

Learning disabilities Language processing ADHD/ADD Emotional Difficulties

Has your child been tested for (please check all that apply):

Learning disabilities Language processing ADHD/ADD Emotional Difficulties

If yes, please give dates and explanation: _____

Please list the subjects in which you believe your child excels: _____

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Student Sibling Information			
Sibling Name:	Enrolled Here?	DOB	Current School
	Yes No Waitlist		
	Yes No Waitlist		
	Yes No Waitlist		
	Yes No Waitlist		
I certify that all of the above information is true and complete, to the best of my knowledge			
Parent/ Guardian Signature		Date	

Please return this completed application and attachments to: Toledo Islamic Academy, Attention: Admissions, 5225 West Alexis Rd., Sylvania Ohio 43560. Registration fees are due with this application. Please contact the main office to inquire about registration fees. Fees are required to be fully admitted. Currently a \$300 late registration fee will be added to returning students not registered by July 1st.

The Toledo Islamic Academy recruits and admits students of any race, color or ethnic origin to all its rights, privileges, programs and activities. In addition, the school will not discriminate on the basis of race, color or ethnic origin in the administration of its educational programs and athletic/extracurricular activities. Furthermore, the school is not intended to be an alternative to court or administrative agency ordered, or public school district initiated desegregation.

The Toledo Islamic Academy will not discriminate on the basis of race, color, or ethnic origin in the hiring of its certified and non-certified personnel.

For Office use only:	
Application Date:	Acceptance: YES/ NO /Waitlist

