



INSTITUTE OF ISLAMIC EDUCATION

Admission Application Form

[Alim, Hifz, Nazrah, Hifz and Academic and Ifta Programs, Sisters Quran Program]

Mark X in the appropriate box(es). Full-time Part-time

What program you are applying for? (Mark X in one any of the following squares)

Alim Program Hifz Program Hifz and Academic Program
Ifa Program Nazrah Sisters Quran Circle

Please paste your recent passport size photograph here.

ENROLMENT NO:

(Leave blank if you do not have an enrolment no.)

PERSONAL INFORMATION

Name _____ | _____ | _____
Last First Middle/Maiden

Address _____
Street City State Zip Code

Email _____

Phone (Home) _____ (cell phone) _____

Date of Birth ____/____/____ Age on the date of application ____ years ____ month
(Mark X in the appropriate boxes): Sex Male Female Single Married

Social Security Number ____ - ____ - ____ U.S. Citizen? Yes No

If no, Country of Citizenship _____ Country of Birth _____

PARENTS/LEGAL GUARDIAN (Minor Students must furnish details of their parents/legal guardians in the provided sections below):

Name of Father/legal Guardian

_____ | _____ | _____
Last First Middle/Maiden

Address _____
Street City State Zip Code

Email _____

Phone (Home) _____ (cell phone) _____

Profession _____ (work phone no) _____

Name of Mother

_____ | _____ | _____
Last First Middle/Maiden

Address _____
Street City State Zip Code

Email _____

Phone (Home) _____ (cell phone) _____

Profession _____ (work phone no) _____

Duly Filled form should be returned to Admission Office, IIE, 1280, Bluff City Blvd, Elgin 60120, IL.

PREVIOUS ACADEMIC RECORD

Did you attend IIE before? Yes No If yes, Year/Date of first enrolment _____

Program in which you were enrolled _____

Why did you leave IIE? _____

Other institutions

School/Program	Year	Grade/ Class	Subjects	Result/ CGPA

Are you applying for Dormitory services and accommodation at IIE? Yes No

DECLARATION

I, the undersigned hereby declare that all statements made in the application are true, complete and correct to the best of my knowledge and belief. I understand that in the event of any information being found untrue/false/incorrect I/my ward shall be terminated from the school without any prior notice and fee paid against the admission or any fee paid during the period I or my ward was staying with IIE or studying in IIE shall not be refunded. I shall pay all tuition and boarding payment by the first of each month, I also understand that tuition and boarding fee are non-refundable once are paid, furthermore, I do agree to pay a late fee of \$25 if I am late in making the payment. I agree that should I fall behind payments for more than 3 months, all records, report cards, and registration renewal will be withheld until the balance is cleared. Should I decide to withdraw myself or my ward from IIE, I agree to provide the school with written notice before doing so.

Parent/Guardian Signature _____ Date _____

(If student is a minor)

Student Signature _____ Date _____

OFFICE USE ONLY (Do not write in the space below.)

Admission granted Not granted Reason of refusal _____

New Student Returning Student Grade/Program _____

Hifz Teacher _____ Other details _____

Annual Tuition Fee \$ _____ Monthly Tuition Fee \$ _____

Annual Boarding Fee \$ _____ Monthly Boarding Fee \$ _____

PAID ON THE DAY OF REGISTRATION \$ _____ For _____

Signature of the Officer in Charge _____ Date _____