

# **ABU-RAYYAN ACADEMY**

P.O Box 86845-80100 Mombasa

Tel: 0722 299 287/0723755108

## **APPLICATION FOR ADMISSIONS**

## PERSONAL INFORMATION

Pupil's Name:			
Address:	_City (	County:	
Country:Te	lephone:	Age	Sex
Date of Birth	Birth of Place	e:	
Citizenship:	Applying for	year:	Grade
Name of Parent/ Guardian:			
Home address	Telephone_		Occupation
Name of company		_Cell phone	
Email			
Name of Mother or Guardian:			) NO
Any medical condition:		Preferr	red hospital
I AGREE TO ABIDE BY TI	HE SCHOOL RULES		AN
			Al Chimmun 2
Signature of Parent/Guar  NB: Please attach the Lea  ✓ Birth (certificate) c  ✓ 2 Passport size pho  ✓ Copy of the Parent	rner's: copy, oto	Director's	Signature JU SET LULS
Date Enrolled:	Adm	ission Number	

## **FEE STRUCTURE 2025/26**

### FIRST TERM

Class	Vote Head( Ksh)
Nursery	13,000
PP1 & PP2	15,500
Grade 1 – 3	17,000
Class 4 & 5	18,500
Grade 6	18,500
Grade 7 – 9	24,500

### **SECOND TERM**

Class	Vote Head( Ksh)
Nursery	13,000
PP1 & PP2	15,500
Grade 1 – 3	17,000
Class 4 & 5	18,500
Grade 6	18,500
Grade 7 – 9	24,500

## **THIRD TERM**

Class	Vote Head( Ksh)
Nursery	13,000
PP1 & PP2	15,500
Grade 1 – 3	17,000
Class 4 & 5	18,500
Grade 6	18,500
Grade 7 – 9	24,500

NOTES

1. Admission fee for new students: Ksh. 2,000

2. Diary and report books: Ksh. 250 each

3. Swimming fee: Ksh. 2,500 per term



