



ADMISSION PROCEDURES FOR AL-HIKMAH ISLAMIC MONTESSORI SCHOOL **(AHIMS)**

PLEASE READ CAREFULLY

As-Salaam Alaikum,

Thank you for your interest in Al-Hikmah Islamic Montessori School (AHIMS), and for your enquiry for the admission of your son or daughter. To be considered for entry, please complete the attached Registration Form and submit this and the other documentations stated, to AHIMS. However, the completion of this form does not guarantee admission, but we hope to be in a position to welcome you soon to the AHIMS community.

You are asked to provide the following on application turn in:

1. Completed Registration Form
2. AHIMS Student Health Record
3. AHIMS Child Profile Form
4. AHIMS Student Emergency Contact Form
5. AHIMS Parental Consent Form for Publication and Media
6. Copy of IMMUNIZATION CARD
7. Copy of Child's Passport/Birth Certificate
8. Two recent passport size photographs of your child (please write the child's name on the back of the photo)
9. Passport size photograph of Mother and Father (please write full name on the back of the photo)
10. An academic progress report from your child's previous nursery/preschool (if applicable)

Please note that these documents must be submitted before your child joins Al-Hikmah Islamic Montessori School. The school reserves the right to suspend joining dates until all documents have been received. Once the registration documents have been received, our Admissions Manager will be in contact with you to confirm registration of your child.



REGISTRATION FORM

Please note: parents are responsible for updating the school, in writing, of any changes

Student Information

Expected Date of Enrollment..... for Class.....
(day/month/year)

Family Name.....

Given Name.....

Date & Place of Birth..... Sex: M / F

Nationality..... Religion.....

Language(s) Spoken.....

Home Address.....



Family Information

Father/Guardian Name.....

Nationality..... Occupation.....

Company/Organization.....

In residence with child? Yes No

Office Phone..... Home Phone.....

Mobile Phone.....

Email Address.....

Mother/Guardian Name.....

Nationality..... Occupation.....

Company/Organization.....

In residence with child? Yes No

Office Phone..... Home Phone.....

Mobile Phone.....

Email Address.....



Siblings' Information

1. Name.....

Age..... Sex: Male Female

2. Name.....

Age..... Sex: Male Female

3. Name.....

Age..... Sex: Male Female

4. Name.....

Age..... Sex: Male Female

5. Name.....

Age..... Sex: Male Female



AHIMS EMERGENCY CONTACT FORM

Child's Name.....

Class.....

Father's Name/Contact Number.....

Mother's Name/Contact Number.....

Please list below the names and contact details of any family member / friend etc. who we may contact in case of emergency, in the event we are unable to reach parents/carers.

Name	Relation to Child	Contact



AUTHORISED PICK-UP PERSON

Please list below any other adults authorized to collect your child from Al-Hikmah Islamic Montessori School on your behalf. Please also submit a copy of their passport or security/identification and 1 passport size picture.

Name	Relation to Child	Contact



CHILD PROFILE FORM

Please take a moment to complete this form with some additional details about your child. Your child is special and unique. We would like to find out more about your child's needs, likes, dislikes, habits, routines and any other information you feel is important or relevant.

Name and age of child:

Name and ages of siblings:

.....

Other people involved in caring for your child (e.g. nanny, grandparents, relatives, etc.):

.....

Has your child attended nursery before? Yes No

If Yes, please state which nursery and for how long:

.....

Does your child have a special comforter? (e.g pacifier, blanket, teddy, etc.) Yes No

If Yes, please mention the name:

.....

Does your child have any special words, certain things (e.g milk, comforter, toilet, etc.)?

Yes No

If Yes, please mention it:

.....



Can your child:

- | | | |
|--|-----|----|
| a. Wash his/her hands | Yes | No |
| b. Help get dressed | Yes | No |
| c. Eat independently (using hands or utensils) | Yes | No |
| d. Brush his/her teeth | Yes | No |
| e. Help put out toys | Yes | No |

What is your child's favorite:

- a. Food/Drink:.....
- b. Activity/Game:
- c. Toy: d. Cartoon:

Toilet training (ability/plans):

Daytime sleep pattern:

Is there anything in particular that your child does not like?

.....

Is there anything else that you think we should know about your child?

.....

.....



AHIMS STUDENT HEALTH RECORD

To be filled out by parent, please ensure that the school administration is informed of any changes to the information on this document.

Please answer the following questions.

1. YES / NO Does your child suffer from **congenital conditions**? (ex. G6PD, Thalassemia, Hemophilia, congenital heart conditions, cystic fibrosis) If yes, please explain: _____

2. YES / NO Does your child have any allergies (ex. Food, insects, medication)? How do these allergies usually present, and how are they usually treated If yes, please explain: _____

3. YES / NO Has your child had any significant injury, accident or major surgery? (specify problem)? If yes, please explain: _____

4. YES / NO Does your child take any medicine (daily or occasionally)? If yes, please list: _____

5. YES / NO Does your child have any limitation on physical activity? If yes, please explain: _____

6. YES / NO Does your child have any problems with vision, hearing, or speech (ex. wear glasses, contact lenses, ear tubes, or hearing aids? If yes, please explain: _____

7. YES / NO Does your child have any known food or drug allergies? If yes, please explain: _____

8. YES / NO Do you authorize one of AHIMS senior staff to administer Paracetamol (Panadol/Calpol) to your child in case of sudden onset fever?

9. YES / NO Is there any medication that your child may not receive? If yes, please explain: _____

10. YES / NO Would you like to discuss any medical issues with the Administration?

PLEASE NOTE: ALL MEDICATION MUST BE SUBMITTED TO THE NURSE. IT MUST BE IN THE ORIGINAL BOTTLE/PACKAGE WITH PRESCRIPTION FROM DOCTOR.



I further agree to hold AHIMS and all employees harmless in any and all claims arising from the administration of this medication at school. I agree to notify the school in writing at the termination of this request or when any change in the above is necessary.

Parent/Guardian Signature _____

Date _____



PARENTAL CONSENT FORM – MEDIA AND PUBLICATION

Child's Name:
Child's Date of Birth:
Parent/Guardian's Name:
Parent's Email Address:
Parent's Contact Number:

As a school, it is necessary for us to take photographs of your child. We will use these photos for evidence of learning, assessment purposes, to display within the school, in school newsletters, in the educational app and similar. We may also wish to use photos for other purposes as below, please tick the appropriate response:

YES / NO I give permission for the school to use photos of my child (including family members) on the Al-Hikmah Islamic Montessori School Website and social media platforms (Facebook, Twitter, Instagram, YouTube, etc.)

YES / NO I give permission for my child's name and photograph (family name) to be used in external publications (eg. Newspapers)

**THIS FORM WILL REMAIN ON RECORD WHILST YOUR CHILD IS IN ATTENDANCE AT
AL-HIKMAH ISLAMIC MONTESSORI SCHOOL.**

Signature.....

Date.....



PRE- SCHOOL AND PRIMARY TUITION STRUCTURE FOR ACADEMIC YEAR 2023

– NEW STUDENTS

The Al-Hikmah Islamic Montessori School (AHIMS) Board of Directors has approved the following tuition structure for the 2023 academic school year for the primary division. This structure does not include snacks and lunch. Your signature on the contract page signifies your acceptance of these terms. All fees are payable in Ghana Cedis Only.

1. APPLICATION FEE – PAYABLE AT ADMISSION

An application fee of GHC50 is payable to cover the administrative costs associated with the admissions process. The fee is non-refundable and must be paid prior to the start of the admissions process. In the event that a student is denied admission or does not take up the offer of a place, the application fee is valid for the academic year for which it is paid plus one more academic year.

2. ADMISSION FEE – GHC500

The admission fee is a one-time, non-refundable payment for all new students and must be paid in full at the time of admission. The admission fee includes two sets of school uniforms and two polo tops.

3. BOOKS - GHC150 PER TERM

All students are required to pay an amount of GHC150 per term for academic year 2022 to cover the cost of books.

4. TUITION FEE – GHC5400 (GHC1800 PER TERM)

Tuition fees cover all major operating expenses of the school. Fees may be paid on an annual basis or in three payments. All payments must be made in full, before the set deadline. Tuition once paid is non-refundable. A family of 3 or more fee paying students concurrently enrolled at AHIMS will receive a 20% scholarship on the tuition fee of their third child, a 30% scholarship on the tuition fee of the fourth child, etc. New students enrolling after the commencement of a term must pay for the entire term. Students withdrawing after the commencement of a term forfeit the remainder of that term's fees. Parents must provide one full term advance written notice to the Head of School if they intend to withdraw their child(ren). Failure to provide this notice will incur a fine of one term school fees.

5. PAYMENT PROCEDURE

All fee payments can be made by cash, cheque, bank deposits or mobile money payments. Please contact the School Head for details.