

**Zakaria Muslim Girls' High School**  
111, Warwick Road. Batley, West Yorkshire, WF17 6AJ  
Tel/Fax: 01924-444217

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**ADMISSION FORM FOR ACADEMIC YEAR \_\_\_\_\_**

Surname \_\_\_\_\_ Other Names \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Mother tongue \_\_\_\_\_ Nationality \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Home Telephone No: \_\_\_\_\_

Father's / Guardian's Name \_\_\_\_\_ Occupation \_\_\_\_\_

(if working)

Place of work \_\_\_\_\_ Work Tel No: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

(if working)

Name of relative / Neighbor Name \_\_\_\_\_

To be contacted in emergency

Tel No: \_\_\_\_\_

Name of Present School \_\_\_\_\_

Address \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Tel No: \_\_\_\_\_

Health (Medical) \_\_\_\_\_

Allergy, Illness or Disability \_\_\_\_\_

Periods of stay Abroad (in the last 5 years) From \_\_\_\_\_ To \_\_\_\_\_

Place / Country \_\_\_\_\_

I hereby apply for admission for my daughter \_\_\_\_\_ to the school. I agree to abide by the school rules and regulations.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

**This agreement has been witnessed by (2 referees who are not immediate family):**

**Signed** \_\_\_\_\_ **Signed** \_\_\_\_\_

**Name** \_\_\_\_\_ **Name** \_\_\_\_\_

**Address** \_\_\_\_\_ **Address** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Date** \_\_\_\_\_ **Date** \_\_\_\_\_

\_\_\_\_\_

**FOR OFFICIAL USE ONLY**

**Date of Admission** \_\_\_\_\_ **Admission number** \_\_\_\_\_