

APPLICATION FORM 2015/16

Masjid Suffah SUFFAH MAKTAB 2750 Jiles RD Kennesaw, GA 30144

Details of Childre	n Applied for Unde	er This Application:
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Child # 1 Name:	Date of Birth:
Child # 2 Name:	Date of Birth:
Child # 3 Name:	Date of Birth:
Child # 4 Name:	Date of Birth:
Father's Name:	Mother's Name:
Address:	
Phone Number: Home:	Work:
Father's cell:	Mother's cell
Best Contact Email:	

Principles of Learning:

I, the undersigned parent/guardian of the above-mentioned student, am applying for admission into Suffah Masjid's *Suffah Maktab*. I understand that admission into the *Maktab* entails that the student will comply with all the rules and regulations as determined by the Principal, Maulana Mohammed Faizan Wahid. That the student will follow the teachings of Islam as mandated in the Quran, Sunnah and expounded by the Ulama. I also understand that the student will be expected to show respect for both property and person, will study his/her assigned lesson(s) , and will

display due diligence in conduct and endeavor.

Should any matter(s) arise that warrants concern, resolution will be sought-after via the means of civil discussion and mutual consultation with the principal and Imam.

All parents/guardians are required to arrange rides to and from Masjid Suffah for maktab class. All parents/guardians are required to pick up their child(s) promptly after maktab class finishes.

Signed

Date

FEE [This is a monthly fee regardless of when the student is admitted]

1 child \$50 monthly 2 children \$70 monthly

3 or more children \$100 monthly

Method of payment:

Cash 🛛

Check Delease write checks out to Suffa Dawat Center Maktab