

AL-NOOR SCHOOL
675 4TH AVE. BROOKLYN, NY 11232
PHONE: (718) 768-7181 FAX: (718) 768-7088

Waiting List Application School Year 2015-2016

Today's Date: _____ **APPLYING GRADE:** _____

Student's Full Name:		
_____ (First)	_____ (Middle)	_____ (Last)
Address:		
_____ House Number	_____ Street	_____ Apt. No.
_____ City	_____ State	_____ Zip

Date of Birth: ____/____/____	Gender: Male Female
Place of Birth: _____	Date entered US: ____ / ____ / ____
Father: _____	Mother: _____
Home Phone: _____	Cell Phone: _____
Emergency Phone: _____	Work Number: _____
Email (if any): _____	
Last School Attended: _____	Phone #: _____
Does your child have siblings in Al-Noor School? YES NO	
If yes, please provide name(s) & grade(s): _____	

FOR OFFICIAL USE ONLY

Math Score: _____%	____ Birth Certificate
English Score: _____%	____ Immunization
Admitted: Y or N	____ Physical
Admission Date: _____	____ Last Report card
Signature of Principal: _____	____ Attendance Record