

20/11, Carron place (off Saranankara Road), Kalubowila, Dehiwala – 10350 Sri Lanka.

Email: info@fathacademy.com Website: www.fathacademy.com

Telephone: +94 11 744 6885, +94 77 994 0946

STUDENT APPLICATION FORM

DETAILS OF STUDENT FULL NAME: NAME WITH INITIALS: RESIDENTIAL ADDRESS: DATE OF BIRTH: AGE: NIC NO: **MOBILE: EMAIL ADDRESS: DETAILS OF THE GUARDIAN FULL NAME: RELATIONSHIP TO STUDENT: OCCUPATION OF GUARDIAN:** NIC NO: **OCCUPATIONAL ADDRESS: TELEPHONE: MOBILE: EMAIL ADDRESS: PAST SCHOOL ATTENDED** NAME: **SCHOOL ADDRESS: LAST CLASS: MEDIUM:**

DETAILS OF THE MOTHER	
FULL NAME:	
HIGHEST LEVEL OF EDUCATION:	
OCCUPATION OF MOTHER:	NIC NO:
OCCUPATIONAL ADDRESS:	
TELEPHONE:	MOBILE:
EMAIL ADDRESS:	
SKILLS AND COMPETENCES	
LANGUAGES:	
FLUENCY IN QURAN RECITAL: YES/NO	JUZUS MEMORIZED:
OTHER SKILLS (IF ANY):	
PERSONAL DETAILS	
ANY STUDENT RELATED SICKNESSES OR SPECIAL AFFAIRS TO BE TAKEN IN TO CONSIDERATION	
CHECKLIST OF DOCUMENTS TO BE SUBMITTED FOR	R ADMISSION
FILLED APPLICATION FORM:	
TWO PHOTOS:	
COPY OF BIRTH CERTIFICATE:	
O/L ADMISSION CARD:	
PROGRESS REPORT:	
MEDICAL CERTIFICATE:	

TERMS AND CONDITIONS

The applicant shall work as a full time dedicated student (time and effort) upon admission to the institution as long his studentship is valid.

The applicant shall be obedient to all rules and regulations imposed by the institution, at all times during his studentship at the institution.

This educational institute shall have the right to discipline the student if found in misconduct, and breach of any student and disciplinary policies.

I HEREBY AGREE THAT ALL THE PARTICULARS AND DOCUMENTS PROVIDED ON ADMISSION, IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

APPLICANT SIGNATURE	OFFICE USE ONLY! ADMISSION NUMBER:
	REMARKS (IF ANY):
DATE:	
GUARDIAN SIGNATURE	