



Granada Islamic School

3003 Scott Blvd., Santa Clara, California 95054

Phone: (408) 980-1161 Fax: (408) 980-1120

Accredited by Western Association of Schools and Colleges

For Office Use:
Family ID: _____
Student ID: _____
Priority: _____
Tested: _____
Accepted: _____
Registered: _____

Application for Admission 2009-10 Submit with \$75 fee

Grade (circle one):

Staff DC PK K 1st 2nd 3rd 4th 5th 6th 7th 8th

Student Information (Please print clearly)

Student's last name: _____ First name: _____ Middle Initial: _____

Birth date: _____ Age: _____ Boy Girl Soc. Sec. No:

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Place of birth: _____ State/Country of birth: _____

Home address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ Other home phone: _____

Student lives with

- Parents Father only
 Mother only Other _____

Has student applied/attended GIS before? Yes No

Are siblings currently attending GIS? Yes No

Last school attended

Name: _____

Phone: _____

Address: _____

Street State Zip

County: _____ Last grade completed: _____

NOTE: If student is not residing with both parents, proof of custody must be submitted at registration time.

Father (or guardian) Please inform the school if there is any change in the information provided here.

Last name: _____ First name: _____ Middle initial: _____

Address (if different from students): _____ City: _____ State: _____ Zip: _____

Home phone: _____ Profession: _____ Soc. Security No: _____

Employer's name: _____ Occupation: _____

Employer's address: _____ Work phone: _____

Cell phone: _____ Email: _____

Mother (or guardian) Please inform the school if there is any change in the information provided here.

Last name: _____ First name: _____ Middle initial: _____

Address (if different from students): _____ City: _____ State: _____ Zip: _____

Home phone: _____ Profession: _____ Soc. Security No: _____

Employer's name: _____ Occupation: _____

Employer's address: _____ Work phone: _____

Cell phone: _____ Email: _____

Other Information:

Race: White Black, or African American American Indian, Alaskan Native Asian Native Hawaiian Other Pacific Islanders

Ancestry: (Refers to an individual's nationality, lineage, or country where parents were born before arriving in the United States) _____

Language(s) Spoken

The following questions are helpful in determining the language(s) spoken at home by students and assist us in providing meaningful instruction for all students.

1. Which language did your son/daughter learn when he/she first began to talk? _____
2. What language does your son/daughter most frequently use at home? _____
3. What language do you use most frequently to speak to your son/daughter? _____
4. Name the language most often spoken by the adults at home? _____

Date student first attended school in the US, grades K-12 _____

Has the student ever been enrolled in a special education program? Yes No

If yes, please explain: _____

Emergency contacts other than parents (include 3 local contacts and one out-of-state contact, if possible):

Name: _____ Relationship: _____ Daytime phone: _____

Name: _____ Relationship: _____ Daytime phone: _____

Name: _____ Relationship: _____ Daytime phone: _____

GIS Emergency Policy: Minor first aid will be administered by GIS staff. Parents and emergency contacts will be called for injuries/illnesses beyond our ability to handle. "911" will be called to assist in the event of serious illness or injury. The GIS emergency policy is in effect for all students. Your child's attendance in the school signifies your acceptance of this policy.

Has this student ever had psychological testing or been screened for academic difficulties or learning disabilities? Yes No

Is there any other medical information GIS should be aware of? _____

Family physician: _____ Phone: _____

Parents' /Guardian's Consent: (Please note by signing sections 1, 2, & 3, you are giving GIS permission to publish information & photograph of your child)

1. Do you give permission to GIS to print your child's name and phone number in the School Directory?
Yes, I give permission to GIS, to print my child's name & phone number in the School Directory. **Signature:** _____
2. Do you give permission to GIS to publish your child's picture on the GIS website, and other school publications?
Yes, I give permission to GIS, to publish my child's picture on the GIS website & other school publications. **Signature:** _____
3. Do you give permission to GIS to publish your child's picture in the School Yearbook?
Yes, I give permission to GIS to publish my child's picture in the School Yearbook. **Signature:** _____
4. I understand that I need to fulfill my 20 hours volunteer time during the year. If I do not fulfill these hours by the appointed dates, I will be charged a Volunteer Fee.

Signature: _____

I understand that Arabic and Islamic Studies are mandatory subjects at Granada Islamic School, and I agree to work with or provide a tutor for my child to achieve the passing grade needed for promotion to the next grade.

Parent's signature: _____

Date: _____

Print name of parent signing above: _____

Granada Islamic School of MCA admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, athletic and other school administered programs.