



# Garden of the Sahaba Academy

3100 N.W. 5th Avenue, Boca Raton, FL 33431  
 Tel (561) 395-3011 • Fax (561) 395-3029 • info@assahaba.org • http://www.assahaba.org

## APPLICATION FOR ADMISSION

*In order to be considered for admission, application must be filled out completely*

Application Date	/ /	School Year	-	<input type="checkbox"/> Male <input type="checkbox"/> Female
------------------	-----	-------------	---	---

<b>Grades</b>	<input type="checkbox"/> Kindergarten	<input type="checkbox"/> First Grade	<input type="checkbox"/> Second Grade	<input type="checkbox"/> Third Grade
<input type="checkbox"/> Fourth Grade	<input type="checkbox"/> Fifth Grade	<input type="checkbox"/> Sixth Grade	<input type="checkbox"/> Seventh Grade	<input type="checkbox"/> Eighth Grade

<b>Student</b>	Name	Last	First	Middle
	Primary Language	Other Language(s)		SS #
	Date of Birth	Month	Day	Year
	Place of Birth	Citizenship		
	Ethnicity	<input type="checkbox"/> White(non-Hispanic) <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> African-American <input type="checkbox"/> Asian <input type="checkbox"/> Mixed <input type="checkbox"/> Other		

<b>Education</b>	Present/Last School	City/State
	<input type="checkbox"/> Public <input type="checkbox"/> Independent/Private <input type="checkbox"/> Parochial	
	Years of Attendance	Grade Completed
	Other schools attended in the last three years and date of attendance	

<b>Parent / Guardian</b>	<b>Father</b>	Father Name	Last	First	Middle
		Address	Street	City	State/Zip
		Home Phone	Cell Phone		
		Work Phone	Email		
		Place of Birth	Citizenship		
		Primary Language	Other Language(s)		
		Education Background			
	Occupation	Employer/Business			
	<b>Mother</b>	Mother Name	Last	First	Middle
		Address	Street	City	State/Zip
		Home Phone	Cell Phone		
		Work Phone	Email		
		Place of Birth	Citizenship		
		Primary Language	Other Language(s)		
Education Background					
Occupation	Employer/Business				



# Garden of the Sahaba Academy

3100 N.W. 5th Avenue, Boca Raton, FL 33431  
 Tel (561) 395-3011 • Fax (561) 395-3029 • info@assahaba.org • http://www.assahaba.org

## FAMILY INFORMATION

Parents are (please check all that apply):

- Married
- Separated
- Divorced
- Parent Remarried/please specify \_\_\_\_\_
- Parent Remarried/please specify \_\_\_\_\_
- Parent Deceased/please specify \_\_\_\_\_

If a parent or guardian is living abroad or out-of-state, please specify \_\_\_\_\_

If parents are separated or divorced, who has legal custody of child? \_\_\_\_\_

Who is financially responsible for the child? \_\_\_\_\_

Which parent receives admissions correspondence? \_\_\_\_\_

Sibling Name	Date of Birth	Current School	Current Grade

Please list relatives who currently attend or have graduated from Garden of the Sahaba Academy

How did your family hear about our School? (friends, colleagues, internet, Masjid, Ad etc.)

## MEDICAL HISTORY

Allergy: \_\_\_\_\_

Medication Taken: \_\_\_\_\_

Medical Concern: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

## EMERGENCY CONTACT (other than Parent/Guardian)

Name	Home Phone	Cell Phone
Relationship to Student	Work Phone	

SCREENING: Florida Statutes 402.32 and 230.2312 require that health screening should be done. Throughout the school year screening will be conducted for vision, hearing, height and weight, and lice. Parents are to inform GSA, in writing, if they do not want their children to receive these screenings.



# Garden of the Sahaba Academy

3100 N.W. 5th Avenue, Boca Raton, FL 33431  
 Tel (561) 395-3011 • Fax (561) 395-3029 • info@assahaba.org • http://www.assahaba.org

## Student Release —(The following people are permitted to remove my child from the school premises)

Name	Home Phone	Relationship
Name	Home Phone	Relationship

VOLUNTEERING: I will help my child's class (Circle one):                      YES                      NO  
 Can GSA Parent Teacher Organization (PTO) contact you?                      YES                      NO

## TUITION AND FEES

School tuition is a yearly commitment. Tuition payment may be made in one annual amount or on a monthly plan administered through the SMART Tuition and Management Services. Limited financial aid is available and is approved on a first come first served basis. Deadline for submitting new and renewal financial aid applications is July 15.

Fees not received by the tenth (10th) day of each month incur a late charge of \$25.00. The child will not be allowed to attend the class after the twentieth (20th) day of the month until the fees are paid in full. Returned checks are subject to a \$30 charge.

- \$200 Registration Fee enclosed (non-refundable)
- \$300 Textbook Fee enclosed
- \$150 Computer Lab Fee 6<sup>th</sup>- 8<sup>th</sup> grade
- \$100 Campus Enhancement Fee
- \$50 Technology Fee KG-5<sup>th</sup> grade

The tuition, and fees are listed on a separate document. After-school and bus transportation are also available at an additional charge.

Tuition, as in virtually all independent schools, does not meet the full cost of educating the student. The difference between tuition and the actual cost is made up by fundraising, primarily through the Annual Fundraising Dinner. Parents are expected to participate to the best of their ability in supporting these crucial activities.

## ADMISSIONS POLICIES

GSA admits student of any race, color, religion, gender, nationality and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to its students and does not discriminate on the basis of race, gender or religion in administration of its educational policies, admissions, programs.

Signature of Parent or Guardian

Date