



AL-LATHIF ISLAMIC SCHOOL

REGISTRATION FORM 2018 - 2019

PRIMARY SCHOOL

Registration Date :

Class Required :

Full Name :

Nick Name : Sex : Male / Female

Religion : Blood Group : O A B AB

Brith (Date & Place) : (...../...../.....)

Nationality : Age :

Please list previous schools, beginning with last one attended, include pre-school and nursery school:

School Name	Grade

Did the child repeat any grades ? If yes, what grades?

Reason for leaving :

Home Address :

Phone : Pos Code :

Did the child receive any of the educational services listed below at previous schools?

If so, please check the service and indicate the grade or grades.

Service	Grade
Speech/language/esl	
Vision therapy	
Counseling	
Psychological testing	
Gifted and talented	
Transitional classes	

Service	Grade
Hearing therapy	
Remedial reading	
Remedial math	
Learning support	
Emotional support	
Extended day classes	

FAMILY INFORMATION

Father's Full Name : Phone :

Father's Employer : Father's work phone :

Address :

Mother's full name : Phone :

Mother's employer : Mother's maiden name :

Address :

NAMES OF ALL PERSONS LIVING WITH THE CHILD

Last Name	First Name	Relationship

Brother/Sister (Full Name)	Brithdate	Age	Grade

HEALTH HISTORY AND CERTIFICATION OF IMMUNIZATION STATUS

Please enter the date that dose was received

Vaccine	1	2	3	4
Any Combination of DTP, DT, and TD				
OPV (oral polio)				
MMR (measles, mumps, rubella)				
Hepatitis B				
Varicella				

Allergies (food, medicine, bee sting):

.....

.....

.....

Special information or restriction we should know about your child :

.....

.....

.....

List the names of two people in the community who can assume temporary care of your child if you cannot be reached:

Name	Relation	Phone Number

LANGUAGE

What is/was the student's first language?

.....

What language(s) is/are spoken in your home?

.....

What are your hope for you child's preschool experience at Al-Lathif Islamic School?

.....

.....

.....

5. Fill in the registration we needed.
6. Follow the test at the date.
7. Application fee and admissions testing fee non-refundable.

SCHOOL FEES 2018 – 2019

FEES	AMOUNT (IDR)	NOTES
Registration and Psychology Test	1,200,000	Upon application and non-refundable
Development Fee (Building, Facilities, and School Events)	9,225,000	One time payment
Textbooks and Worksheet	2,200,000	Annual payment
School Events and Activities	3,470,000	Annual payment
Uniform	1,500,000	6 uniform
Monthly School Fees	800,000	Monthly payment
Amount of all fees	18,395,000	

Fee Payment

The School fees need to be paid directly to the Al-Lathif (Noor Rakhmah Foundation) bank account. All payment must be by transfer. Cash is not accepted.

Payment by bank transfer may be made to one of the school accounts as listed below.

Please ensure that use the correct bank account details for the currency before sending your payment.

Beneficiary : Yayasan Noor Rakhmah
Bank name : Bank Muamalat Indonesia
 Capem Cihampelas, Bandung
Account number : 103000868

Assesment Requirements Documents

1. Photocopy of school records of the child in the previous/last school, he/she attended.
2. Photocopy of current passport and KITAS of both parents and the enrolling child/ children (for non-Indonesian nationality).
3. Photocopy of the child's/children's birth certificate(s).
4. Photocopy of the Family Card (Kartu Keluarga) (for Indonesian nationality).
5. 4 (four) recent close-up photographs : 2 x 3 cm and 4 x 6 cm

Note Original documents may be requested by the school.