ADMISSION APPLICATION PACKET

AL-RAZI SCHOOL
Burlington, North Carolina

Bismillah ir-Rahman ir-Rahim

Dear Parents and Guardians,

As-salamu alaikum wa rahmatullahi wa barakatuhu,

Thank you for your interest in Al-Razi School. We are honored that you are considering our school for your child's education. Al-Razi School is committed to providing an excellent Islamic and academic education in a nurturing environment that fosters spiritual, intellectual, and social development.

This registration packet contains all the necessary forms and information needed to complete your child's enrollment. Please read through all documents carefully and ensure all forms are completed in full.

Required Documents for Admission:

- Completed Admission Application
- Birth Certificate (copy)
- Immunization Records
- Previous Academic Records (if applicable)
- Signed Tuition Agreement
- Admission Fee Payment

We look forward to welcoming your family to the Al-Razi School community.

Al-Razi School Administration

AL-RAZI SCHOOL ADMISSION OVERVIEW

Al-Razi School welcomes applicants and does not discriminate based on color, race, religion, gender, disability, or national origin.

The applicant is expected to abide by the rules and regulations of the school. Admission is granted subject to fulfillment of certain conditions.

The admission process includes:

- Submission of completed application form
- Payment of non-refundable admission fee
- Evaluation of prior academic records (if applicable)
- Family interview with administration

FEE SCHEDULE 2026-2027

Program	Grade Levels	Annual Tuition	Payment Options
Full-Time School	KG – 2nd Grade	$8,000	See below
PreK & Daycare	PreK (5 days/week)	$9,000	See below

Tuition and Fees are subject to change at any time

Payment Plan Options:

Payment Plan	Due Dates	Amount per Payment
Annual	August 1st	Full tuition ($250 discount per
Monthly	1st of each month (10 payments)	1/10 of annual tuition

Please note: 3% Credit Card Payment

Additional Fees:

- Registration Fee (non-refundable): $200
- Books & Educational Material (non-refundable)- $500/Annually per Student

Late Payment Policy:

- Payments are due by the dates specified above
- Continued non-payment may result in suspension of services

AL-RAZI SCHOOL STUDENT ADMISSION APPLICATION

Date of Application: _____

STUDENT INFORMATION

Student Name: _____
(Last Name) (First Name) (Middle Name)

Nickname (if any): _____ **Gender:** □ Male □ Female

Date of Birth: _____ **Age:** _____ **Grade Applying For:** _____

Place of Birth: (City) _____ (State/Country) _____

Social Security #: _____ (required)

Home Address: _____
City: _____ State: _____ Zip Code: _____

Previous School Attended: _____
Address: _____
Dates Attended: From: _____ To: _____
Reason for Leaving: _____

LANGUAGE INFORMATION

Student's First Language: _____

Language(s) Spoken at Home: _____

Does student speak English fluently? □ Yes □ No

Does student read/write in English? □ Yes □ No

Does student need English language support? □ Yes □ No

AL-RAZI SCHOOL PARENT/GUARDIAN INFORMATION

FATHER/GUARDIAN 1

Full Name: _____
Relationship to Student: _____
Date of Birth: _____ **Place of Birth:** _____
Occupation: _____ **Employer:** _____
Work Address: _____
City: _____ State: _____ Zip Code: _____
Work Phone: (____) _____ **Cell Phone:** (____) _____
Home Phone: (____) _____ **Email:** _____
Highest Education Level: _____
Languages Spoken: □ English □ Arabic □ Other: _____

MOTHER/GUARDIAN 2

Full Name: _____
Relationship to Student: _____
Date of Birth: _____ **Place of Birth:** _____
Occupation: _____ **Employer:** _____
Work Address: _____
City: _____ State: _____ Zip Code: _____
Work Phone: (____) _____ **Cell Phone:** (____) _____
Home Phone: (____) _____ **Email:** _____
Highest Education Level: _____
Languages Spoken: □ English □ Arabic □ Other: _____
Preferred Method of Communication: □ Email □ Phone □ Text
Primary Contact Person: □ Father/Guardian 1 □ Mother/Guardian 2

AL-RAZI SCHOOL EMERGENCY & MEDICAL INFORMATION

EMERGENCY CONTACTS (Other than parents)

Emergency Contact 1:

Name: _____ Relationship: _____

Phone: (____) _____ **Alt. Phone:** (____) _____

Address: _____

_____

Emergency Contact 2:

Name: _____ Relationship: _____ _____

Phone: (____) _____ **Alt. Phone:** (____) _____

Address: _____

_____

Authorized Pick-up List (List all individuals authorized to pick up your child)

1. _____ Relationship: _____
2. _____ Relationship: _____
3. _____ Relationship: _____

MEDICAL INFORMATION

Physician Name: _____
Physician Phone: (____) _____ **Clinic/Hospital:** _____

Health Insurance Provider: _____
Policy Number: _____

Does your child have any of the following?
□ Asthma □ Heart Disease □ Epilepsy □ Diabetes □ ADHD/ADD
□ Allergies (specify): _____
□ Other Medical Conditions: _____

Current Medications: _____

Dietary Restrictions: _____

Administration of Medicine

School policy prohibits school faculty and staff from administering any medication (even aspirin or acetaminophen) to students without the written permission from the parents and written directions from the physician. Only medication prescribed by a doctor can be administered at Al-Razi School. If a child is recovering from an illness and medication needs to be administered, the following procedures must be complied with:

1. Parents must bring the medication to the school and fill out a Permission to Administer Medication Form. Do not send any medicine to school with your child.
2. Instructions for administering medication must be supplied by the physician and kept on file in the office (this note is in addition to the label from the pharmacy and must clearly indicate the quantity of medication, the time of day it is to be given, and for what duration of time it should be taken).
3. The medication must stay in the original container supplied by the pharmacy and have detailed administration instruction intact and legible on the bottle or package.

The medication will be administered by school faculty and staff only. Children are not permitted to keep medication with them during the school day.

In case of emergency, I authorize Al-Razi School to:
□ Administer basic first aid
□ Contact emergency medical services
□ Transport my child to nearest medical facility if necessary

Parent/Guardian Signature: _____ Date: _____

AL-RAZI SCHOOL TUITION AGREEMENT & CONTRACT

This agreement becomes a binding contract upon acceptance of the student's application by Al-Razi School Administration.

Student Name: _____ Grade: _____ School Year: 20___-20___

I/We, the parent(s)/guardian(s), understand and agree to the following:

1. **Tuition and Fees:**
    - I agree to pay the full tuition amount of $_____ for the academic year
    - I understand that tuition is non-refundable after the first week of school
    - I have selected the following payment plan: □ Annual □ Semi-Annual □ Quarterly □ Monthly
2. **Financial Responsibility:**
    - I understand that I am financially responsible for the full year's tuition regardless of withdrawal
    - I agree to pay all fees on time according to the selected payment plan
3. **Academic Policies:**
    - I will ensure my child attends school regularly and on time
    - I understand excessive absences may result in academic probation or dismissal
    - I will support the school's Islamic values and academic standards
4. **Code of Conduct:**
    - My child will follow all school rules and Islamic etiquette
    - I understand that serious or repeated violations may result in suspension or expulsion
    - I will cooperate with school administration regarding disciplinary matters
5. **Textbooks and Supplies:**
    - I understand that I am responsible for purchasing required textbooks and supplies
    - I agree to replace any school property damaged by my child
6. **Withdrawal Policy:**
    - Please view website for more details

Parent/Guardian 1 Signature: _____ Date: _____

Parent/Guardian 2 Signature: _____ Date: _____

AL-RAZI SCHOOL CONSENT FORMS & AUTHORIZATIONS

Student Name: _____ Grade: _____

PHOTO/VIDEO CONSENT

I □ give consent / □ do not give consent for my child to be photographed or videotaped for:

- School yearbook
- School website and social media
- School promotional materials
- Classroom activities and projects

FIELD TRIP PERMISSION

I □ give permission / □ do not give permission for my child to participate in school-sponsored field trips with proper supervision and transportation.

TECHNOLOGY USE AGREEMENT

I understand that my child may use school technology resources for educational purposes and agree to the school's technology use policy.

□ I have read and agree to the Technology Use Policy

ISLAMIC STUDIES PARTICIPATION

I understand that Islamic Studies, Quran, and Arabic are core components of the Al-Razi School curriculum and my child is required to participate in these classes and related activities including daily prayers.

□ I agree to my child's participation in all Islamic activities

HEALTH SCREENING CONSENT

I □ give consent / □ do not give consent for my child to participate in routine health screenings (vision, hearing) conducted at school.

COMMUNICATION PREFERENCES

Please send school communications via:
□ Email □ Text Messages □ WhatsApp □ Printed copies

Parent/Guardian Signature: _____ Date: _____

AL-RAZI SCHOOL POLICIES ACKNOWLEDGMENT

Please initial next to each policy to indicate you have read and understood:

_____ **Attendance Policy:** Students must maintain 90% attendance. Excessive absences may result in retention or dismissal. The teacher will provide any missed assignments; it is the parent’s responsibility to ensure the student does not fall behind.

_____ **Uniform Policy:** Students must wear the prescribed school uniform daily. Uniform requirements will be provided upon enrollment.

_____ **Homework Policy:** Students are expected to complete all homework assignments. Parents should provide a suitable study environment.

_____ **Discipline Policy:** Al-Razi School uses positive behavior support. Serious infractions will be handled according to the disciplinary procedures outlined in the Parent Handbook.

_____ **Drop-off/Pick-up Policy:** Students may be dropped off no earlier than 7:30 AM and must be picked up by 3:30 PM (Full-Time) or 6:00 PM (Daycare).

_____ **Health Policy:** Sick children must stay home. Students with fever, vomiting, or contagious conditions will be sent home. Students must be fever-free for 24 hours (without fever-reducing medication) before returning to school.

_____ **Communication Policy:** Teachers and administration will maintain regular communication with parents regarding student progress.

_____ **Islamic Environment:** All students are expected to participate in daily prayers and maintain Islamic etiquette.

_____ **Parent Involvement:** Parents are encouraged to volunteer and participate in school activities and events.

_____ **Grievance Policy:** Concerns should first be addressed with the teacher, then administration if necessary.

I acknowledge that I have read and understood all school policies. I agree to support and enforce these policies with my child.

Parent/Guardian 1 Signature: _____ Date: _____

Parent/Guardian 2 Signature: _____ Date: _____

AL-RAZI SCHOOL ADMISSION CHECKLIST

Student Name: _____ Grade Applying For: _____

Please ensure all items are submitted with your application:

Required Documents

□ Completed Admission Application (Pages 3-4)
□ Parent/Guardian Information Forms (Page 4)
□ Emergency & Medical Information (Page 5)
□ Signed Tuition Agreement (Page 6)
□ Signed Consent Forms (Page 7)
□ School Policies Acknowledgment (Page 8)
□ Copy of Birth Certificate
□ Copy of Immunization Records
□ Copy of Social Security Card (optional)
□ Previous School Records/Report Cards (if applicable)
□ Custody Documents (if applicable)

Required Fees

□ Registration Fee: $200 (non-refundable)
□ First Tuition Payment (amount depends on payment plan selected)
□ Books & Educational Material Fee: $500 (non-refundable)

Additional Requirements for PreK/Daycare

□ Toilet Training Confirmation (for PreK)
□ Emergency Medical Form
□ Food Allergy Action Plan (if applicable)

Office Use Only

Application Received: _____
Registration Fee Received: □ Cash □ Check #_____ □ Credit Card
Books & Educational Material Fee Received: □ Cash □ Check #_____ □ Credit Card
Documents Complete: □ Yes □ No Missing: _____
Admission Decision: □ Accepted □ Waitlist □ Denied

Interview Scheduled: _____
Start Date: _____

Reviewed by: _____ Date: _____

AL-RAZI SCHOOL IMPORTANT INFORMATION

School Hours

Full-Time School (PreK-2nd Grade):
Monday - Friday: 8:00 AM - 3:00 PM

Daycare:
Monday - Friday: 7:30 AM - 6:00 PM
(No weekend services)

School Calendar

The school follows a traditional academic calendar with breaks for:

- Islamic holidays (Eid al-Fitr, Eid al-Adha)
- Winter Break
- Spring Break
- Professional Development Days

A detailed calendar will be provided upon enrollment.

Uniform Information

Uniform requirements will be provided upon acceptance. All students must wear:

- School-approved uniform:
    - Long Sleeve Dark Green Collared Shirt
    - Beige Pants
        - No Shorts, Skinny Jeans, Leggings
- Closed-toe shoes
- Modest clothing in accordance with Islamic guidelines

Contact Information

Al-Razi School
1908 S. Mebane St
Burlington, NC 27215

Phone: 919-998-9078
Email: info@alrazischool.org
Website: www.alrazischool.org

Office Hours: Monday-Friday, 7:30 AM - 4:30 PM

Thank you for choosing Al-Razi School for your child's education!