



RAZI SCHOOL

Application for Admission

School Year _____

Date _____

Personal Data

Name of the Student: Last _____ First _____ Middle _____

Sex _____ Date of Birth (m/d/y) _____ - _____ - _____ Place of Birth _____

Language spoken at home (Child is fluent at) _____

Country of Origin: Father _____ Country of Origin: Mother _____

Please list all schools that the student has attended, beginning with the recent School attended:

School	Address	Dates of attendance	Grade
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List any special awards of recognition which applicant has received at school or in the community:

If your child has had any special testing, tutoring or therapy in the last four years, please describe the Nature and the results of such efforts.

If your child has had any major operation or injuries, note the type and the year.

If your child regularly takes any medication, Please explain:

If your child has any sight, hearing or other impairment that would require special attention, please explain:

If there are any activities that your child should refrain from, please explain:

Family Data

Father's Name: Last _____ First _____ Middle _____

Mother's Name: Last _____ First _____ Middle _____

Guardian's Name: Last _____ First _____ Middle _____
(If child is not living with parents)

Home address _____

City _____ State _____ Zip Code _____ Telephone No _____

Father's Employer _____ Address _____

City _____ State _____ Zip Code _____ Telephone No _____

Mother's Employer _____ Address _____

City _____ State _____ Zip Code _____ Telephone No _____

Admission Procedure

- Return the completed application, together with a copy of the applicant's birth certificate or passport to Razi School with the \$40.00 **nonrefundable** filling fee.
- All applications for Kindergarten and up must be tested for placement. Kindergarten applicants must be five years old by December 31 to be eligible for admission and will be tested to determine their readiness for school learning. Applicants for first grade and up will be tested for their achievement in language and mathematics. Pre-Kindergarten children have to be at least 3 years old by September 1.
- Decisions on admission to Razi School are made by the Administration as soon as testing is complete and relevant information has been received. Openings in classes are limited and early application is recommended. Decisions made by the Administration are communicated to the parents as promptly as possible. If no place is available due to a full class, the applicant will be placed on a waiting list.
- Proof of Immunization and a recent PPD. Test for tuberculosis must be presented before a student is allowed to attend class. Also, student in pre-Kindergarten and Kindergarten and any students transferring to Razi School from a school outside of New York City must have the school medical form completed and signed by a physician before attending class.
- All due tuition and fees are to be paid to the school **before** a student can attend class.

Please turn page to sign!

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

Terms and conditions of Razi School

This application is merely a request for admission. It becomes binding upon the undersigned only when the applicant has been examined and formally accepted and fees are paid.

It is understood that classes are limited and priority in placement is given to those students who are currently enrolled in the school. Among pre-kindergarten applicants, students are accepted on a first come, first serve basis. In addition to that, priority is given to children who have a sibling enrolled in the school prior to applying for pre-kindergarten.

Razi School reserves the right to exclude any student permanently or temporarily at any time that the Administration deems such action advisable, either in the interest of the student or for the good of the school.

Signature of Parent or Guardian _____ Date _____

For office use only

- | | |
|---|--|
| <input type="checkbox"/> Application fee received | <input type="checkbox"/> Immunization Record received |
| <input type="checkbox"/> Check | <input type="checkbox"/> Student Identification received |
| <input type="checkbox"/> Money Order | <input type="checkbox"/> Birth Certificate |
| <input type="checkbox"/> Cash | <input type="checkbox"/> Passport |
| <input type="checkbox"/> Other | |

Student Records received _____

Placement Test Score _____

Date of enrollment and Grade _____

Waiting list Number and Grade _____

Application received by _____ Date _____