

# MUHAMMAD ISLAMIC INSTITUTE



**CENTRE FOR ISLAMIC DEVELOPMENT**  
promoting understanding and peace through education

Address: 2728 Robie Street, Halifax, NS, B3K 4P2.

Phone: 902-4544284.

Email: cidonline.halifax@gmail.com

Website: www.cidonline.ca

## Application for Admission

Please complete each section in **BLOCK LETTERS**

### Section 1: PERSONAL DETAILS

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

CONTACT DETAILS: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Commonly Spoken Language(s): (i) \_\_\_\_\_ (ii) \_\_\_\_\_ (iii) \_\_\_\_\_

Monthly Donation Requested to help the Program (to be put in donation box)  Any Amount.

### Section 2: ACADEMIC DETAILS

Class in which admission is sought: \_\_\_\_\_ Full Time/Part Time: \_\_\_\_\_

#### HIFZ (RECITATION) PROGRAM

LEVEL-1 BIGENNERS			LEVEL-2 INTERMEDIATE			LEVEL-3 ADVANCED		
Days	Timing		Days	Timing		Days	Timing	
Saturday	10 am – 12:00 Pm		Saturday	12:15 – 3:00 Pm		Saturday	3:15 – 5:00 Pm	
Sunday	10 am – 12:00 pm		Sunday	12:15 – 3:00 pm		Sunday	3:15 – 5:00 Pm	
Tuesday	5:30 – 6:30 Pm		Monday	5:30 – 6:30 Pm		Monday	6:40 – 9:00 Pm	
Wednesday	5:30 – 7:30 Pm		Tuesday	6:40 – 9:00 Pm		Wednesday	7:40 – 9:00 Pm	
						Friday	5:30 – 9:00 Pm	

\*\*Please mark the days you want to attend\*\*

### Section 3: PERSONAL DETAILS

I confirm that, to the best of my knowledge, the information provided in this form is correct. I have understood and agree to abide by all school rules.

#### RULES AND REGULATIONS:

- 1) I will try to be regular to the class.
- 2) In case of absence, I will inform the school.
- 3) I will be present on the days indicated on form and will notify in case of changes in routine.
- 4) I understand that I will be EXPELLED from the program, if I am absent for three weeks without prior notice.

\_\_\_\_\_  
**Signature of the Student**

\_\_\_\_\_  
**Date**

**Signatory's Name:** \_\_\_\_\_