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Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Relation to Student: \_\_\_\_\_

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Contact Information for person(s) who will pick up and drop off student

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

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**Does the student have brothers and sisters of school age? If yes:**

Brother  Sister Age \_\_\_\_

Brother  Sister Age \_\_\_\_

Brother  Sister Age \_\_\_\_

Brother  Sister Age \_\_\_\_

Brother  Sister Age \_\_\_\_

Brother  Sister Age \_\_\_\_

**Medical Information:**

Please mark if your child has any of the following:

ASTHMA

TUBERCULOSIS

HEART DISEASE

CONVULSIONS

DIABETES

CANCER

ORTHOPEDIC PROBLEMS

EPILEPSY

HEARING IMPAIRMENTS

SPEECH IMPAIRMENTS

ALLERGIES, please specify \_\_\_\_\_

OTHER MEDICAL CONCERNS OR LIMITATIONS: \_\_\_\_\_

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:

\_\_\_\_\_

If your child has had any major operations or injuries, note the type and the year:

\_\_\_\_\_

If your child regularly takes any medication, please explain:

\_\_\_\_\_

FAMILY PHYSICIAN'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

**PLEASE NOTE: The responsibility lies with the parent/legal guardian to advise the school of any changes in the medical or physical conditions of the student. MCS Staff and Personnel are not legally permitted to administer any medication to students on behalf of the parents/guardians.**

**MCS Admission Procedures**

Decisions on admission to MCS are made by the administration as soon as all relevant information has been received. To be eligible for admission, the student must demonstrate academic abilities that are compatible with the educational standards of MCS. Decisions made by the administration are communicated to the parents as promptly as possible. Level placement in MCS is the sole responsibility of the school, as are teacher and class assignments. If no space is available, the applicant will be placed on a waiting list.

**Financial Responsibility**

Once your child has been accepted, the non-refundable tuition fee is due. A limited number of merit-based scholarships are available; if interested, please contact the MCS Administrative Assistant.

**Tuition Fees**

MCS tuition fees per session:

- *One Student:* \$150.00
- *Two Siblings:* \$225.00
- *Three or more Siblings:* \$275.00

*Any additional donations are welcome. Please make checks payable to the Mustafa Center School.*

**Please read and sign below:**

- MCS admits students of any national or ethnic origin and does not discriminate in administration of its educational and admission policies, scholarship and loan programs, and other school administered programs.
- The school administration reserves the right to admit or reject the applicant, if such an action deems necessary and in the best interest of the school.
- Approval of student application is subject to the completion of the parental contract.

*I hereby certify that all information on this application is true and complete to the best of my knowledge. I understand that any withholding or falsification of information on this application is grounds for dismissal of the student.*

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Parent/Guardian

**Please do not write below this space. For school use only:**

<input type="checkbox"/> Tuition Fee Received: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Cash  Amount paid: \$ _____	<input type="checkbox"/> Parental contract signed and received  <input type="checkbox"/> Scholarship/financial aid received	Application Received by _____ Date Received _____ Date of Enrollment _____ Class Assigned to _____
_____ Principal's Signature	_____ Date	