

Western Sydney Urdu School, NSW

Student Enrollment Form-----Year 2025

(May post filled form to 12 Plane Street, Prestons NSW 2170 or email to: UrduSchool@Hotmail.com)

Preferred Location of URDU School (Please Tick only ONE box):

Amity, Prestons Amity, Auburn Colyton, Mt. Druitt

STUDENT:

Surname: _____ Given Names: _____ Boy / Girl

Date of Birth: _____ Main Stream School: _____ Class: _____

Mother Tongue: _____ Any Allergies: _____ Any food restriction: _____

Any special requirement / instruction: _____

PARENT: (Father / Mother)

Surname: _____ Given Names: _____

Address: _____

Phone (Home): _____ Phone (Work): _____

Mobile: _____ Email: _____

COURSE LEVEL:

Based on prior Urdu skills of the student, would you suggest his/her admission to any of the following level: [Teacher will assess the students during first session]

Foundation Stage-1 Stage-2 Stage-3

The classes have been scheduled on Saturdays for two hours starting 11:00 am

Semester – I : Feb to April

Semester - II : May to December

NOTE: Volunteer fee per semester: \$20 per student goes to annual school fund raising.

IN CASE OF EMERGENCY:

Contact person: _____ Relationship to Student: _____

Phone (Home): _____ Mobile: _____

Doctor (GP): _____ Phone: _____

Nominate: [If student(s) to be picked by other than parents]

Name: _____ Relationship to Student: _____

Signed

Date

(For Official Use)

Prior Urdu skills, assessed by the teacher: Nil, F/n, S-1, S-2, S-3

Admitted to the class: _____ Date: _____ Remarks: _____

Promoted to class: _____ Date: _____ Remarks: _____