

Sultan Education Academy (SEA) Application Form

'Classical Arabic Programs and Knowledge Classes. Home of the SEA Learn Arabic Guarantee'



Section 1: Personal Information

Full Name: _____

Date of Birth: (MM/DD/YYYY): _____ Gender: Male Female

Current Mailing Address: _____

Telephone: _____ (home) _____ (cell)

Email Address: _____

Do you wish to Join our Mailing list? Yes No

Occupation: _____

Language(s) spoken at home (if not English): _____

Emergency Contact Name: _____ Relationship: _____

Telephone: _____ (home) _____ (cell)

If under the age of 18:

Parent/Guardian:(Dad) _____ (Mom) _____

Name of anyone other than Parent or Guardian authorized to take student(s) to or from School: _____

Please list any allergies or medical conditions:

Section 2: Academic

I am interested in the following program(s):

Adult Arabic Program Level: I II III Other

Youth Arabic Program Level: I II III Other

Adult Islamic Program Name: _____


Youth Islamic Program Name: _____

Other Program Name: _____

Please explain why you are interested in the above program(s): _____

Current Level of Arabic: _____

Please list any previous courses you have taken that are relevant to the program you are applying for: _____

	Registration Date: / / 2012
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Signature of Student or Parent/Guardian

Please Check → 6-Month Commitment 3-Month Commitment
 Month-Month Private Instruction