



RASUL AL AKRAM ACADEMY – NAIROBI.

(Boys' Secondary School)

P.O BOX 33058-00600, Nairobi, KENYA : TEL. :0768274566/0755564813: Email :
rasulacademy@gmail.

ADMISSION LETTER.

NAME: FORMER SCHOOL:

INDEX/ADM. NO.: REPORTING DATE:

K.C.P.E MARKS:..... .. NEMIS NUMBER:

Congratulations for passing your **KCPE** Exam and qualifying for admission in our school. Our school strives to excel in all areas that are necessary to mould a young person into a responsible and useful citizen by the end of four year period.

Our school Motto is **TARGETING ALL ROUND EXCELLENCE**. Every student must strive for excellence all the time in all areas especially discipline in order to excel in academics. Parents are requested to be close partners in order to realize this vision of the school upon their sons.

LOCATION.

The school is situated in Karen, along Langata Road, about 500m from Mamba Village junction, off Kuwinda Road.

DOCUMENTS TO PRESENT ON ADMISSION DAY.

1. Certified copy of KCPE result slip.
2. Copy of primary leaving certificate.
3. 2 passport size photos .
4. Copy of Birth certificate.
5. Medical fitness certificate from a public hospital (Medical form provided).

SCHOOL UNIFORM.

1. 2 Pairs of Dark Grey Long trousers.
2. 2 White Long Sleeved Shirts (**With badges**)
3. Black leather Shoes – 1 Pair (**with laces**)
4. Socks – 2 Pairs (**Grey with white/blue stripes**)
5. Games uniforms: -
 - Green /Yellow T-Shirt - 1 Pc. (**with school badge and name at the back**)
 - Rubber shoes - 1 Pair. (**white**)
 - Track Suit - 1 Pair (**Navy blue with two white stripes on the sleeves**)
6. 1 Tie (**with school badge**)
7. Sweater (**with school badge**)
8. Navy Blue School Blazer (**with school badge**)
9. A Pairs of Light Blue bed sheets.
10. 2 Blankets.

11. Mosquito Net.
12. Towel.
13. Personal Toiletries.
14. Pajamas (**any color but must be plain**)
15. 1 Mathematics Geometrical Set.
16. 20 A4 Exercise Books (16 ruled and 4 squared), 4 Biro Pens and 2 Pencils
17. A navy blue jumper with school badge.
18. A plate , a cup (melamine) and a spoon.
19. A scientific calculator (**for those joining form three**).
20. Mathematics Four Figure table (7th Edition)
21. Proper slippers (**Umoja brand**).
22. A ream of printing papers.
23. An oxford dictionary.
24. Kiswahili kamusi.
25. Paliarment of owls (play) (**for the Form one students**).
26. A spring file.

NB. *Items no.9 – 14 is for those students joining in Boarding.*

STUDENT’S DETAILS.

Complete this form as accurately as possible in capital letters.

Students’ full name:

.....

Class of admission: **Nationality**.....

Religion **Date of birth** **Place of Birth**

County **Sub County** **Location**.....

Sub-location **Village**

Any special health/medical condition :

.....

Previous school (s) attended:

Primary school (s) **From**..... **To**.....

Index Number..... **K.C.P.E Marks**..... **Grade**.....

Secondary School (Admission in F2 and 3 Only)..... **Adm.No:**

State of parents (tick where applicable):

- 1) Both living(2) Both deceased....(3) Father living.... (4) Mother living....

Fathers’/Mothers’ details:

Name:Occupation:

Postal address: Mobile phone no:

Next of kin:

Name:..... Relationship:

Postal address: Mobile phone no:

Declaration: I hereby certify that the information given above is true to the best of my knowledge.

STUDENT PLEDGE:

I promise that for the period of my stay at **Rasul Al Akram Academy**, I shall at all times work hard in my studies, participate fully in all the school activities, abide by the rules and regulations and obey all those in authority.

Date: Student’s Signature.....

PARENT’S/GUARDIAN’S ACKNOWLEDGEMENT:

I parent/guardian (Delete where necessary) of understand and accept that my son/ward is admitted at **Rasul Al Akram Academy** on condition that he upholds his pledge, and that the school retains the right of admission.

Date: ID/No.: Signature:

INCASE OF EMERGENCY CONTACT:

Mr./Mrs./Miss/Doctor:

Postal Address
.....

Telephone No. Office/House: Mobile:

*In case of a medical emergency, where do you recommend your son/ward to be treated at?

Hospital :.....

NB.

***It shall be the parent's/guardian's sole responsibility to meet the medical cost of their child/ward in case the student is taken to hospital by the school.**

MEDICAL EXAMINATION FORM:

NAME:

AGE.....

CLASS/ FORM.....

MEDICAL BACKGROUND.

Have you ever suffered from any of the following conditions?

Asthma

TB

High Blood Pressure

Diabetes.....

Epilepsy

Peptic Ulcers.....

Mental Illness

Skin Allergies.....

Heart Diseases.....

Hearing Problems

Any chronic illness

FAMILY MEDICAL HISTORY:

Any history of the following in the family?

- Asthma
- TB
- Diabetes
- Epilepsy
- Mental Illness
- Heart Diseases
- High Blood Pressure
- Any chronic illness

PHYSICAL EXAMINATION:

- Height: Weight: Eye Colour:
- Respiratory Cardiovascular: Pulse..... BP
- Abdomen
- Genital Urinary Tract
- Central Nervous System
- Musculo – Skeletal
- Visual Acuity
- It(R)
- It (L)

INVESTIGATIONS:

- Stool
- Urinalysis
- Widal

NAME OF THE EXAMINING OFFICER:

Signature **Date**..... **Official Stamp**.....

ANNUAL SCHOOL FEES STRUCTURE: 2023/2024.

BOARDING

VOTE HEAD	1ST TERM	2ND TERM	3RD TERM
ADMISSION FEES	2,000/=	-	-
ACTIVITY FEES	1,000/=	-	-
TUTION	25,000/=	20,000/=	20,000/=
BOARDING FEES	15,000/=	15,000/=	10,000/=
TOTAL	KS HS. 43,000/=	KSHS. 35,000/=	KSHS. 30,000/=

DAY

VOTE HEAD	1ST TERM	2ND TERM	3RD TERM
ADMISSION FEES	2,000	-	-
ACTIVITY FEES	1,000	-	-
TUTION	25,000/=	20,000/=	15,000/=
TOTAL	KSHS. 28,000/=	KSHS. 20,000/=	KSHS. 15,000/=

FEES ARE PAYABLE ONLY THROUGH OUR BANK ACCOUNT AS BELOW:

ACCOUNT NAME: RASUL AL AKRAM ACADEMY.

ACCOUNT NUMBER: 0678992001.

DIAMOND TRUST BANK (D.T.B)
(LAVINGTON BRANCH)

SAFARICOM PAYBILL NO. 4071455

ACCOUNT NUMBER: Name of the student & Class.

KCB BANK ACCOUNT:

ACCOUNT NAME: RASUL AL AKRAM ACADEMY LIMITED.

ACCOUNT NUMBER: 1292896159.

KCB M-PESA PAYBILL: 522522

KCB TILL NO: 5813477

ACCOUNT NUMBER: Name of the student & class.