



*Muhammad's Mosque No. 24
Muhammad University of Islam
408 East Main Street Richmond, Virginia 23219
804.231.2155 / 804.412.5406
www.muirichmond.org
respectfor4life@gmail.com
twitter.com/RichmondMui
https://www.instagram.com/mui_richmond/*

Muhammad University of Islam: Pre-Enrollment Application

This application identifies your interest in your child attending Muhammad University of Islam.

Please print clearly.

Student Name: _____

Date of Birth: _____ Current Age: _____

Current Grade: _____

Ethnicity: _____

Current School: _____

Phone: _____

School Address: _____

Parent Name: (M) _____ (F) _____

Address | City | Zip Code: _____

Phone Number: _____

Email Address: _____

Religious Affiliation (Muslim, Christian, etc.): _____



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How would you describe your child's current academic performance?
(1st-12th graders) Excellent(A) Good (B) Satisfactory(C) Unsatisfactory (D/F)

Does your child have an IEP at his previous/current school? YES | NO

Has your child been staffed or considered for staffing? YES | NO

Does your child have a condition (physical or mental) that requires specialized services (i.e. major accident, injuries, major surgery, etc.)? YES | NO

Please explain:

Where did you hear about Muhammad University of Islam?

Why are you interested in your child attending Muhammad University of Islam? If your child is returning, why have you decided for your child to return to M.U.I.?

Parent Signature: _____

Date: _____

Providing false information may result in student being declined or ineligible for enrollment at M.U.I