

Online Enrollment Packet Instructions for New Applicants

- 1. Log into your Parents Web Account, go to www.renweb.com
- 2. Select the **Login** button from the menu bar located at the upper right hand corner of the screen



3. Select the **Parents Web Login** button from the drop-down menu.



4. Select the Create New ParentsWeb Account link



RenWeb ParentsWeb Login

District Code:
User Name:
Password (case-sensitive):
Forgot User Name/Password?
Parent Student Staff
Login
Create New ParentsWeb Account

- 5. Enter IF-IL into the District Code field
- 6. Enter your email address (must be the same email you provided in your Online Application to the school)
- 7. Click the Create Account button



RenWeb ParentsWeb Login

District Code: * Required

Email:

Create Account Back to Login

- 8. You will receive an email from RenWeb Customer Support containing a link that will allow you to create your username and password. For security purposes the link will remain active for 6 hours only
 - a. Please click on the link provided in the email
 - b. A **Change/Create Password** screen will open. You may use the default username provided, or create a new username
 - c. Then type in your desired password into the **Password** field and **Confirm** field
 - d. Click on the Save Username and/or Password button
- 9. Type in the district code IF-IL and your username and password

10. After logging in, click on the Family Information button in the left menu

	In the name of A	llah, Most Merciful and Compassionate	
SCHOL	FOUNDATION SCHOO	L	
Logout School Information School Home Calendar Directory Classes Photo Gallery Resource Documents	Announcements #5 Alumni Association As an effort to reade a bond between all the Alum	Today Tomorow Events Today Tomorow 6/10/2016 AP Exams	School Catendari Dates to Note 5/30/2016 Memorial Day 6/10/2016 2015-2016: C4 End
Student Information • Family Information • Cattor Revealedtor Cattor R			

11. Click on the Enrollment/Reenrollment link

	In the name of Allah,	Most Merciful and C	ompassionate			
SCHOL	FOUNDATION SCHOOL					
Welcome Back	Family Information					
Logout	Parent)	Contact Info				
School Information +	(Parent)					_
Student Information +	(hild)	Name:				
Family Information	(Child)	Address:				
Family Home Family Profile Family Billing Financial Aid Tuition Plan Sign Up	(Grandparent)	Home: Cell: Work: Email:				
Enrollment / Reenrollment						_
Latest Newsletter Get the RenWeb Home App	Web Forms Earnity Demographic Form		Account Total	Balance	Details	PayNow
Learn More about the Ren/Web Home app for accessing Parents/Web information via the convenience of an						

12. Click on "Start Enrollment Packet" for the desired student

	Online Enrollment			
ONLINE ENROLLMENT	Welcome TEST PARENT. You are currently lo	ogged in.		
	Packets to Test: Enrollment Responsible Pa	irent O Secondary P	larent	
	Packets to Test: Enrollment Responsible Pa School Year: 2017-2018 Student	rrent O Secondary P For Grade	arent Enrollment Packet Status	
	Packets to Test: Enrollment Responsible Packets School Year: 2017-2018 Student Islamic Foundation School, Test (New)	rrent O Secondary P For Grade 01	earent Enrollment Packet Status Start Enrollment Packet	Will Not Enroll
	Packets to Test: Enrollment Responsible Packets School Year: 2017-2018 Student Islamic Foundation School, Test (New) Islamic Foundation School, Test (New)	rrent O Secondary P For Grade 01 02	tarent Enrollment Packet Status Start Enrollment Packet Start Enrollment Packet	Will Not Enroll Will Not Enroll

13. Please read through the instructions carefully, then select Next.

	Instructions & Resources
ONLINE ENROLLMENT	
TEST (NEW) ISLAMIC FOUNDATION SCHOOL	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
Instructions & Resources	Next >
Enrollee Information	
Household Information	Assalamu 'alaikum. Welcome to Islamic Foundation School's Online Enrollment packet.
Emergency Contacts and	Instructions
Authorized Pickup	Please complete the Online Enrollment forms listed in the menu beginning with the Enrollee Information form.
Home Language Survey	Note the following:
Medical Information	 Yellow caution sign will appear in the menu next to forms that are missing required information.
Program Participation and Release Form	 Green check mark will appear next to the form's menu item if it has been completed. After you have completed the enrollment packet, CLICK on the 'Complete Review and Submit Enrollment Packet' button
Document Upload	for the registration fees.
Financial Assistance	 Once the payment has been submitted, a confirmation notification will appear. Please print this form for your records. IFS will not be able to duplicate this confirmation notification.
Financial Responsibility	After your enrollment packet is submitted, within 10 business days you will receive an email regarding next steps.
	Enrollment Checklist
FACTS Tuition	The following documents are required to be uploaded:
Enrollment Packet Review	· Cuardian Marant Drivers License of State TD 10 1 10 . 1 111
	 Oblatituati e account holder on FACTS) Oblatituati e account holder on FACTS)
	 Record of physical examination (Provided and zigned by the child'z physician; must have been administered within the last 10 months prior to Aug 15th, 2017) Immunistical Record.
	Infinumization Records Today practice shot and Meningitis (Ist does is required)
	 Vision examination records (Must have been administered within the last 10 months prior to Aug 15th 2017)
	• Dental records (Must have been administered within the last 10 months prior to Aug 15th 2017)
	Hearing- Audiometric Records (Must have been administered within the last 10 months prior to Aug 15th, 2017)

If you have any questions about the process, please feel free to contact our front office at 630-941-8800 ext. 1000 or email us at admissions@ifsvp.org.

Thank you, IFS Registrar 14. Enter all enrollee information. The red * indicates required information. You will not be able to submit the packet until all required fields are entered. You may forward through the screens and return to previous screens by selecting the appropriate tabs located at the top.

	Enrollee Information
ONLINE ENROLLMENT	
TEST (NEW) ISLAMIC FOUNDATION SCHOOL	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
Instructions & Resources	< Save & Back Save Save & Next >
Enrollee Information	
Household Information	Please fill in the following fields about the <i>student</i> as thoroughly as possible.
Emergency Contacts and Authorized Pickup	Student Name Test (New) Islamic Foundation School (change)
Home Language Survey	Student Date of Birth *
Medical Information	1/1/2012 (mm/dd/yyyy)
Program Participation and Release Form	Local School District of Residence *
Document Upload	
Financial Assistance	
Financial Responsibility Agreement	District County *
FACTS Tuition	
Enrollment Packet Review	District State *
	Student Canden t
	OMale OFemale
	Student Ethnicity *
	×
	Student Race *
	☐ Hispanic/Latino
	□ Non-Hispanic/Latino
	Primary Language Spoken at Home *
	< Save & Back Save Save & Next >

15. Enter the Parent/Guardian Information

	Parent/Guardian Informat	ion
ONLINE ENROLLMENT TEST (NEW) ISLAMIC FOUNDATION SCHOOL Instructions & Resources	Test (New) Islamic Foundation School - Year: 2 <save &="" back="" next="" save=""></save>	2017-2018 - Grade: 06
 Enrollee Information 	\triangle There is 1 missing requirement on this form.	
Parent/Guardian Information Emergency Contacts and Authorized Pickup Home Language Survey	Please fill in the following fields regarding you demograph Please note that this information applies ONLY to parents/ second household, or another parent who shares custody, th	hic and contact information. /guardians who reside in the same household as the student. If there is a hey will update their own information separately.
Medical Information Program Participation and Release Form	▲ Family Income: Amount * ○ <\$30K	
Document Upload Financial Assistance Financial Responsibility Agreement	Parent/Guardian One Please Remove From Family?	Parent/Guardian Two (leave blank if not applicable) Please Remove From Family?
FACTS Tuition	□ Yes, Please Remove	Ves, Please Remove
Enrollment Packet Review	Last Name	Last Name
	First Name	First Name
	Middle Name	Middle Name
	Salutation	Salutation
	< Save & Back Save Save & Next >	

16. Enter emergency contacts and authorized pickup.

	Emergency Contacts and Authorized Pickup
ONLINE ENROLLMENT TEST (NEW) ISLAMIC FOUNDATION SCHOOL Instructions & Resources ✓ Enrollee Information	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06 Save & Back Save Save & Next >
✓ Parent/Guardian Information	In the event of an emergency, please provide the name of the person(s) whom the school should contact along with their contact information.
Emergency Contacts and Authorized Pickup	Please also add any person(s) who will be authorized for pickup.
Home Language Survey	Parent - Parent Test
Medical Information	Emergency Contact? *
Program Participation and Release Form	○Yes ○No Emergency Contact Note
Document Upload	B,
Financial Assistance	Authorized Pickup? *
Financial Responsibility Agreement	OYes ONo
FACTS Tuition	Authorized Pickup Note
Enrollment Packet Review	Add Another Contact

17. Enter the appropriate responses for the Home Language Survey

	Home Language Survey
ONLINE ENROLLMENT TEST (NEW) ISLAMIC FOUNDATION SCHOOL	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
Instructions & Resources	▲ There are 3 missing requirements on this form.
 ✓ Parent/Guardian Information ✓ Emergency Contacts and Authorized Pickup 	The state requires the district to collect a Home Language Survey for every new student. This information is used to count the students whose families speak a language other than English at home. It also helps to identify the students who need to be assessed for English language proficiency.
A Home Language Survey	
Medical Information Program Participation and Release Form	 ▲ Language survey: Other lang spoken in home ★ ○ Yes ○ No Language survey: Other lang spoken explained
Document Upload Financial Assistance Financial Responsibility Agreement FACTS Tuition Enrollment Packet Review	▲ Language survey: Language other than Eng ★ ○Yes ○No Language survey: Language other than Eng explained ▲ If the answer to either question above is "wee" the law requires the school to assess your shild's English profisions:
	A it the answer to entire question above is "yes", the law requires the school to assess your child's English proficiency. * Save & Back Save Save Next >

18. Enter all medical information

	Medical Information
ONLINE ENROLLMENT TEST (NEW) ISLAMIC FOUNDATION SCHOOL	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
Instructions & Resources	<pre>< Save & Back Save Save & Next ></pre>
✓ Enrollee Information	Δ There are 13 missing requirements on this form.
 Parent/Guardian Information Emergency Contacts and Authorized Pickup 	Please provide the student's medical information below.
✓ Home Language Survey	Doctor
Medical Information	▲ Name *
Program Participation and Release Form	▲ Phone *
Document Upload	(Ex: 999-999-9999)
Financial Assistance	
Financial Responsibility Agreement	Dentist
FACTS Tuition	A Ivame ~
Enrollment Packet Review	A Phone *
	(Ex: 999-999-9999)

Allergies

Please specify the type of allergry:

- Food
- Seasonal
- Other (Please be specific)

Allergy:

01. 02. 03.

<u>^4</u>

(Comment:
1	

19. Please select your decisions for the Program Participation and Release Form

	Program Participation and Release Form
ONLINE ENROLLMENT TEST (NEW) ISLAMIC FOUNDATION SCHOOL	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
Instructions & Resources	< Save & Back Save Save & Next >
✓ Parent/Guardian Information	Parent/Guardian: The following statements should be read and understood thoroughly. Please select yes or no for each statement and sign at the bottom.
 Emergency Contacts and Authorized Pickup 	Islamic Foundation School provides photographic coverage of school and class activities.
✔ Home Language Survey	I give permission to Islamic Foundation School to release photographs and videos for the following:
Medical Information Program Participation and Release Form	Student Handbook: The student handbook will be distributed during the first ten days of school. I intend to become acquainted with its contents. It is my responsibility to read and review this handbook with my child.
Document Upload	Nawe Coverane
Financial Assistance	* OYes ONo
Financial Responsibility Agreement	School Website * OYes ONo
FACTS Tuition	Educational Purpose
Enrollment Packet Review	* OYes ONo
	ID Picture ★ ○Yes ○No
	Class Picture

* \bigcirc Yes \bigcirc No

Yearbook

* ○Yes ○No

Community Field Trips:

Classes take community based walks off school grounds as a part of the language arts, science, and social studies curriculum. These walks are always supervised by a teacher. I give permission for my child to leave school grounds for community-based walks. You will be notified by the teacher prior to each trip.

* \bigcirc Yes \bigcirc No

Student Award/Honor Information:

The school announces listings of students receiving awards and honors. I give permission for my child's name to be released for the purpose of identifying students who excel.

★ ○Yes ○No

20. Upload all required documents.

- a. There are different requirements pending the grade level you are applying for. Most of these differences are based on required health related documents that are mandated by the Illinois State Board of Education.
- b. We highly recommend you download the required health forms and submit them to your physician, dentist, optometrist/ophthalmologist, and/or audiologist to fill out.

We will accept documents that are generated by the practice, as long as they will provide the information that the state is requesting. To avoid any confusion or documentation that the practice did not provide, that is why we recommend you to download the forms available.

Document Upload

ONI INT ENDOLI MENT	
TEST OTNO ISLANDS	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
FOUNDATION SCHOOL	
Instructions & Resources	< Save & Back Save Save & Next >
✓ Enrollee Information	
✓ Parent/Guardian Information	Please upload the documents noted below. You do have the option to proceed forward and submit the Online Enrollment Packet without having to upload the required documents below. However, the documents be submitted to IFS no later than August
Emergency Contacts and Authorized Pickup	1st 2017. Failure to provide these documents by the requested date will result in a hold on the student's registration. Their seat on the roster will NOT be guaranteed and may be given up another student.
✔ Home Language Survey	Note: IFS is mandated by the Illinois State Board of Education to collect and maintain medical, dental, hearing, and vision records for enrolled students.
✓ Medical Information	
✓ Program Participation and Release Form	Please upload a scanned copy of each of the following items below. This information should be provided for the Parent/Gaurdian that is assuming financial responsibility of the student.
Document Upload	Illinois Driver's License or State ID
Financial Assistance	* Browse
Financial Responsibility	Billing statement from your utility, credit card, and/or phone service
Agreement	* Browse
FACTS Tuition	
Enrollment Packet Review	Please click here to obatain the State of Illinois Certificate of Child Health Examination Form.
	Please print out this form and provide it to your child(ren)'s primary physician. Once completed, please scan and upload here.
	This form must include the following:
	• Record of physical examination (Provided and signed by the child's physician; must have been administered within the last 10 months prior to Aug 15th, 2017)
	. Health History section of the examination form completed by the Decent/Cuardian including the signature and date

- Health History section of the examination form completed by the Parent/Guardian including the signature and
- Immunization Records
 - Tdap vaccine shot and Meningitis (1st dose is required)
 - For more information about the new immunization requirements for 2016-17, please click here

Browse...

Please click here to obtain the State of Illinois Eye Examination Form

21. Please read through the Financial Assistance section.

	Financial Assistance
ONLINE ENROLLMENT TEST (NEW) ISLAMIC FOUNDATION SCHOOL	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
Instructions & Resources	< Save & Back Save Save & Next >
✓ Enrollee Information	Financial Assistance
 ✓ Parent/Guardian Information ✓ Emergency Contacts and Authorized Pickup ✓ Home Language Survey 	If the undersigned feel that they will need financial assistance from IFS to cover the cost of tuition for their child, you must agree to all terms and conditions in the <u>IFS Financial Assistance Policy and Instructions</u> and submit a financial aid application online through FACTS as per instructions listed in that document. You will not be eligible for financial aid if you do not apply for it online through FACTS.
 ✓ Medical Information ✓ Program Participation and Release Form 	Please note that financial assistance is limited and under no circumstances will exceed 50% of total tuition costs. A \$30 dollar fee will be collected from FACTS to assess your Financial Assistance Application. Financial assistance cannot be applied towards your Online Reenrollment packet fees.
✓ Document Upload	After submitting the Financial Assistance Application, there will be a three week turnaround time before receiving any notice regarding your application. It is imperative that you submit all supplemental documents for your application in order to be reviewed.
Financial Responsibility Agreement FACTS Tuition	Date: 11/14/2016 < Save & Back
Enrollment Packet Review	

22. Agree to the terms and conditions for Financial Responsibility. You will be directed to check the box and provide your full legal name.

	Financial Responsibility Agreement
ONLINE ENROLLMENT TEST (NEW) ISLAMIC FOUNDATION SCHOOL	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06
Instructions & Resources ✓ Enrollee Information ✓ Parent/Guardian Information ✓ Emergency Contacts and Authorized Pickup ✓ Home Language Survey ✓ Medical Information ✓ Program Participation and Release Form	The form has been saved. < Save & Back
 ✓ Document Upload ✓ Financial Assistance ✓ Financial Responsibility Agreement FACTS Tuition Enrollment Packet Review 	Please upload the letter here. Browse * ✓ I, the undersigned Parent/Guardian, fully understand that completing this admission packet in its entirety does NOT guarantee my child's acceptance for the 2017-2018 school year at Islamic Foundation School. I, the undersigned Parent/Guardian, fully accept all financial responsibility for the student. Please provide your full legal name in the box below. . Name: Parent Test Date: 11/14/2016
	Check here for Parent/Guardian Signature Date: 11/14/2016 <save &="" back="" next="" save=""></save>

23. Please click on the links for more information regarding Tuition and Fees and FACTS information. IFS partners with FACTS as part of our tuition management and financial assistance assessments. Select the **Go to FACTS** button. *The screen shot below does not show the tab because there are required fields that have not been completed yet.*

ISLAMIC FOUNDATION SCHOOL SCHOLARSHIP + CHARACTER + SERVICE Logged in as Log Out	
	FACTS Tuition
ONLINE ENROLLMENT TEST (NEW) ISLAMIC TEST (NEW) ISLAMIC Instructions & Resources ✓ Enrollee Information ✓ Parent/Guardian Information ✓ Parent/Guardian Information ✓ Energency Contacts and Authorized Pickup ✓ Home Language Survey ✓ Medical Information ✓ Program Participation and Release Form ✓ Document Upload ✓ Financial Assistance ✓ Financial Responsibility Agreement FACTS Tuition Enrollment Packet Review	Test (New) Islamic Foundation School - Year: 2017-2018 - Grade: 06 DLEASE NOTE THE FOLLOWING: Wend directed over to FACTS, please make sure you enter the names and grade levels for ALL of the students you plan to enroll have to create a na greement plan only once in FACTS as long as you enter all of the students you plan to enroll. Please review the <u>Tuition and Fees</u> . Click here for more FACTS information Click here for more FACTS payment method selection, please complete the fields listed below on the Parent/Guardian Information form. A parent Address Parent State Parent Email

Log into your FACTS account. Do NOT create a new account if one already exists. This will create duplicate records. Please notify our main office if you have accidently created one. If you have NOT created a FACTS account, click on the **Create a username & password** tab.

FACTS A Bellet COMM	
Islamic Foundation School	
Welcome to Islamic Foundation School!	Sign In
We are pleased to offer FACTS Payment Plans and Grant & Aid Financial Needs Assessment on the same platform.	Username
To sign up for a payment plan, please refer to the online payment plan invitation you received from FACTS. This invitation will have instructions for you to enroll in a payment plan.	Password
To apply for Grant & Aid, please Sign in (existing FACTS user) or Create a user account.	Sign in Sign in using your e-mail
Enrolling in a FACTS tuition payment plan allows you to select a payment option that best suits your financial needs. The plans listed below are offered by your school. Depending on the start and end date of each plan, they may not always be offered.	Forgot Username / Password?
Monthly Payments:	New Account
Spread your tuition balance over monthly installments. Payment Methods Offered: Credit Card, Automatic Bank Draft	New user? Create an online account. Create a username & password
Semi-Annual Payments:	
Pay your tuition in two installments. Payment Methods Offered: Credit Card, Automatic Bank Draft	Having difficulties? Check our FAQs.
Payment in Full:	
FACTS is a quick, secure method for paying your tuition balance in full. Payment Methods Offered: Credit Card, Automatic Bank Draft	

Please note, payments made through a credit card are assessed an additional charge for processing.

24. Check the box for the correct contact information or **Add New**.

FACTS	
Link Activity While attempting to link this service to yo be applied to all services linked to your	our user account the following information was found to be different. Please select the value you wish to use. The information you select will online account.
Select options for each	category below
E-mail Addresses	Sshariff@ifsvp.org Add New
Daytime Phone Number	O . O Add New
Mobile Phone Number	O Add New
	Submit Cancel

25. You are now at the home page for your account. There may be a balance still indicated on here from the 2016-2017 school year if you have any children currently enrolled, do not be alarmed. Select the **Set up a Payment Plan** link.

Islamic Foundation School		FACTS BEspañol OCustomer Service
Home My Profile Financial Accounts		🛆 Signed in as Saadia [
Hello		
Saadia Shariff #534016449 For Fareeha Shaik and Ibrahim Shaik Current Balance \$464.50 Make a Payment	View Details	FACTS Grant & Aid Apply for Financial Aid with FACTS Start Application
2015-2016 SCHOOL YEAR Payment Plan (105 129 414) Incidental Expenses Set up a Payment Plan	AMOUNT DUE \$464.50 \$0.00	Image: Second system Image: Second system

26. Select the radio button for 2017-2018 School Year.

FACTS	
Islamic Foundation School Please select a term	AE HELP
 2015-2016 School Year 2016-2017 School Year 	
Begin	Cancel
A-AD-0-60 v16.2.10504.11533	Top of Page Customer Service Terms of Use Privacy & Security © 2001-2016 Neinet, Inc. and Affiliates. All Rights Reserved.

27. Select the **Begin** button.

2017-2018 School Year 달
E E E
Want to designate another payer? 🕜
an with FACTS.
ent Co. at 866-441-4637.
Customer Service Terms of Use Privacy & Security 001-2017 Nelnet, Inc. and Affiliates. All Rights Reserved.

28. Verify your contact information. Please select the check box for **Use e-mail correspondence**.

FACTS • @=fast const					KE	source Library	Heedback Horum Customer Service
Televeia Courd	tion Color	.1					2017 2010 Cohool Year 4
Islamic Founda	ation Schoo						2017-2018 School Year
Progress Tracker							L VR
•	-0				-0	0	
Information	Students	Plan Options	Details	Schedule	Authorize	Thank You	
			E	valuation Mod	e		
Contact I Family Inform	nforma nation	tion					
Name E-mail Addresses		Muzammil Qurashi 300 W Highridge Ro Villa Park, IL 60181 United States (630)941-8800 Ext. (847)833-6823 muqurashi@ifsvp.or ♥ Please send me ♥ Use e-mail for or E mail corresponder	d 1044 rg e-mail payment re prrespondence prespondence	Edit minders Details	To stay authoriz agents current cellular automa messag	informed and re re FACTS and it to contact me re and future numt telephone or ott tic dialing syster jes, and/or SMS	ceive the best service, I s representatives and garding my account at any vers that I provide for my ner wireless device using ns, artificial or prerecorded text messages.
		E-mail corresponder provided	ack Next	all e-mail addresses	cit Cancel		

29. Create a payment plan for the **student**(**s**) you are enrolling. **Please make sure you are entering all the students you wish to enroll**. This includes any returning students and new students you wish to enroll.

Enter the student(s) name and grade level.

Please Note:

When you begin a new enrollment packet in RenWeb for your other children, you will be again directed to FACTS. However, you will not have to create a new payment plan. FACTS will recognize that a payment plan with all of your children already exists and you will have the option to return to RenWeb to continue with the remaining steps.

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FAG	CTS								
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Islami	c Foundati	on School						2017-2018 Sc	hool Year 🚦
Progress	Tracker								LIVE HI
		•		0			0		-
Cont Inform	tact nation	Students	Plan Options	Payment Details	Payment Schedule	Review & Authorize	Thank You		
				E	valuation Mode	•			
Stuc	donte								
Stut	Jenis								
	Student First	Name		Student Last Name					
	No records for	ınd						Add Student	
Ad	ld Stud	ent							
			na lelemie Est	undetion Cohool Th				alanda in futura anno	Ilmont nookoto
going	g forward.	idents attendi	ng islamic Fou	Indation School. In	le Renweb enrollme	nt process will i	ecognize all stu	idents in future enro	liment packets
Stu	udent First Nam)e*							
Stu	udent Last Nam	ne*							
Gra Yes	ade Level for 1 ar*	6/17 School	Select		•				
			Save	Cancel					

30. Select your choice for payment plan options. Our monthly payments are set up on a 10 month plan, beginning in Aug till May.

Progress Tr	racker					K
	• •	0	0	0	0	
Contac Informat	t Students Plan Opt ion	ions Payr Det	nent Payment ails Schedule	Review & Authorize	Thank You	
Payn	nent Plan Options	6				
Select a pa	yment schedule			Sho	W: All Items Selected	¥
Monthl	y Payment Plan ending	in May				
Select	Payment Method	Number of Payments	Beginning Month	Available Payment Days	Last Day to Enroll	Enrollment Fee
0	Automatic Payments from • Checking / Savings • Credit Card	10	August 2016	1st 10th 20th	20 Jul 2016 28 Jul 2016 08 Aug 2016	\$0.00
Schedu	uled Full Payment					
Select	Payment Method	Number of Payments	Beginning Month	Available Payment Days	Last Day to Enroll	Enrollment Fee
0	Automatic Payments from Checking / Savings Credit Card 	1	August 2016	20th	08 Aug 2016	\$0.00

Semi Annual Payment Plan

Select	Payment Method	Number of Payments	Payment Months	Available Payment Days	Last Day to Enroll	Enrollment Fee
0	Automatic Payments from Checking / Savings Credit Card 	2	August 2016 January 2017	1st	20 Jul 2016	\$0.00

31. Select your method of payment. You have two options for providing either your bank account number or credit/debit card. There is a 2.75% processing fee if you are providing a credit/debit card.

FACT	S.						
Islamic Fo	undation School						2016-2017 School Year
Progress Track	er						LIVE H
•		•	•	O		0	_
Contact Information	Students	Plan Options	Paymen Details	t Payment Schedule	Review & Authorize	Thank You	
				Evaluation Mo	de		
Dovra	nt Dotoila						
Fayme	ent Details						
Please enter y	our primary financial acc	ount for payments					
Pay using	Select	-	0	The following processing f	ees may apply:		
	Select		ĺ	 Credit Card - up to 	2.75%		
	Add Bank Account -	-		 Debit Card - up to Checking or Savin 	2.75% gs account - no fee		
	Add Oredit Oard			The amount will be disclos	ed once you select y	our payment meth	od.
			Ba	ck Next	Cancel		

32. Payment details continued... Select the check box for Yes, please enroll me in auto pay for incidental expenses, if you chose to do so. Incidental expenses are fees that are outside of tuition, i.e. field trips, hearing & vision exams, PSAT/ACT/AP exams, overdue library fines, etc. Parents/Guardians do have an option to opt out of Auto Pay for Incidental Expenses. If you chose not to select this option, an invoice will be generated and sent to you via email or postal. It will be the responsibility of the Parent/Guardian to ensure payments are received by the due date. Payments to FACTS can be made via over the phone with FACTS, postal, or by logging into your FACTS account and making payment. Going forward, we are no longer accepting payments directly at the school. Payments must be conducted through FACTS.

Islamic Foundation School					2016-2017 School Year 달
Progress Tracker					IVE H
• • •	•			0	-
Contact Students Plan Option Information	s Payment Details	Payment Schedule	Review & Authorize	Thank You	
	E	valuation Mo	de		
Payment Details					
Please enter your primary financial account for payment	nts				
Pay using Chase - 1111	• ?				
Incidental Expenses					
Incidental expenses may be billed separately. If enrolle	d in auto pay, these paym enses	nents will be automatic	ally processed from t	the account above.	
Peace of Mind (POM) Benefit					
The POM Benefit will pay any eligible FACTS unpaid bal	ance in the event of the d	leath of the Responsib	le Party or his/her leg	gal spouse. Covera	ge is only
you have a FACTS Payment Plan Agreement.	e lee lor this benefit is \$1.	7.00. Tou will be auton	laucally reenfolled in	r Oivi each consec	uuve year
Yes, please enroll me in the POM benefit					
	Back	Next	Cancel		

33. Select the day of the month you would like funds to be deducted from your bank account or charged if you have provided a credit/debit card. (Pending the payment method you had selected earlier).

Progress Tracker	
0 0 0	e00
Contact Students Plan Options Pa Information D	ayment Payment Review & Thank You Details Schedule Authorize
Payment Schedule	
What day do you want the future scheduled payments to be on?*	20th 👻
Future Payment Schedule	
Payment Date	Description
Monday, August 22, 2016	Payment
Tuesday, September 20, 2016	Payment
Thursday, October 20, 2016	Payment
Monday, November 21, 2016	Payment
Tuesday, December 20, 2016	Payment
Friday, January 20, 2017	Payment
Tuesday, February 21, 2017	Payment
Monday, March 20, 2017	Payment
Thursday, April 20, 2017	Payment
Monday, May 22, 2017	Payment

34. Check the box for **I have read and accept the terms and conditions of this payment plan**. Then click the **Authorize** button.

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		FACTS Returned Payment Fee F	OIIC
The payment amount will institution finalizes your pa Payment Chase - (Char	be available once your ayment plan agreement. Method 1111 ge)	I have read and accept the terms and conditions of this payment plan Back Authorize Cancel	
Contact Information		с	Chan
Name/Address	Muzammil Qurashi 300 W Highridge Rd Villa Park, IL 60181 United States	✓ Use e-mail for correspondence	
Phone			
E-mail	muqurashi@ifsvp.org		
Student Summary			
lame			
FS Student			
FS Student		Change	e
ayment Details		c	Chan
uture Payments Scheduled	Chase - 1111		
Yes, please enroll me in auto noidental expenses may be bille	pay for incidental expenses d separately. If enrolled in auto pay	these payments will be automatically processed from the account above	

35. Click on the **Continue RenWeb Enrollment** button

FACTS								
Islamic Founda	ation Schoo	I					2016-2017	School Year 달
Progress Tracker								LIVE
Contact Information	Students	Plan Options	Payment Details	Payment Schedule	Review & Authorize	Thank You		
			Ev	valuation Mod	le			
Thank Yo	u							
Thank you for cor	mpleting a FACT	S payment plan for Isla	amic Foundation Sch	ool. Please print a co	py for your records.			
Did you know that	at vou can receive	e text alerts on your m	obile phone? Learn	More				
 An authorized pa 	arty can make pa	yments on your behalf	. Want to designate	another payer?				J
	Payment Me Chase - 1 ⁷	rthod 111	₫ lh	ave read and accept (Sig Continue Ren	the terms and condit ned on 12 May 2016 Web Enrollment	ions of this payment) Print	nt plan	
Contact Inform	mation							
Name/Address		Muzammil Qurashi 300 W Highridge Rd Villa Park, IL 60181 United States		Use e-	mail for corresponde	nce		

36. After being directed back to RenWeb, the following confirmation should appear. Thank you for making your payment method selection with FACTS. Please contact the school to make any changes to your payment plan.



37. Please review your enrollment packet. If you have submitted everything you will not see any fields that have a **Required** listed. You will not be able to submit the packet until all required fields have been entered. Select the **View PDF** button if you would like to retain a copy of the packet for your records.

Select the Complete Review and Submit Enrollment Packet button.

ONLINE ENROLLMENT FREEHA SHAIK Instructions & Resources Enrollee Information Participation and View PDF Moushold Information Grandparents Emergency Costacts and Authorized Pickup Medical Information Financial Responsibility Agreement Student Nuchaame: Financial Assistance Sacred Link Request to Volunteer Form Program Participation and Release Form Program Participation and Release Form Program Participation and Release Form		Review and Submit Enrollment Packet
FXREEHA SHARK Year: 2016-2017 - Grade: 06 Instructions & Resources You have completed all the requirements for this online enrollment. Review your information below. Use the links on the left to make any changes before submiting this packet. Click the Complete Review and Submit Enrollment Packet button to submit you packet and make any fee payments that may be necessary. Religious Affiliation View PDF Household Information Complete Review and Submit Enrollment Packet Grandparents Enerollee Information Student Name: Student Name: Medical Information Student Birth Date: Finncial Responsibility Agreement Student Birth Date: Student Birth Date: Student Email Address: Student Birth Date: Student Email Address: Program Participation and Responsibility Response form Stret Address: Program Participation and Relies Form Campter Email Address: Program Participation and Relies Form Camptry: I i Partors Zin: 60590	ONLINE ENROLLMENT	
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Religious Affiliation View PDF Household Information Complete Review and Submit Enrollment Packet Grandparents Enrollee Information Medical Information Student Name: Medical Information Student Nakname: Financial Responsibility Agreement Student SN/SIN: Financial Assistance Student Email Address: Student Email Address: Complete Review and Submit Enrollment Packet Pinancial Assistance Student Nickname: Student SN/SIN: Student SN/SIN: Student Email Address: Complete Email Address: Program Participation and Release Form Comptry: I Nature Zue: cods90	 Enrollee Information 	make any changes before submitting this packet. Click the Complete Review and Submit Enrollment Packet button to submit your packet and make any fee payments that may be necessary.
Household Information Complete Review and Submit Eurollment Packet Grandparents Enrollee Information Medical Information Student Name: Medical Information Student Nakname: Financial Responsibility Agreement Student Nakname: Financial Assistance Student SN/SIN: Student SSN/SIN: Student SSN/SIN: Sacred Link Student Email Address: Request to Volunteer Form City: Program Participation and Release Form State: IL Compty: Nators Zin: (0059)	 Religious Affiliation 	View PDF
Grandparents Enrollee Information Emergency Contacts and Authorized Pickup Student Name: Medical Information Student Nakname: Financial Responsibility Agreement Student Nakname: Financial Assistance Student SSN/SIN: Student Link Student Emergency Request to Volunteer Form Street Address: Program Participation and Release Form Country: 1 Austrian Country: 1	 Household Information 	Complete Daview and Echevit Excellencet Deduct
Emergency Contacts and Authorized Pickup Enrollee Information Medical Information Student Name: Medical Information Student Nakname: Financial Responsibility Agreement Student Nakname: Financial Assistance Student SSN/SIN: Student Limit Home Phone: Student Email Address: Sacred Link Student Email Address: Request to Volunteer Form City: Program Participation and Release Form State: IL Country: Austrian Zin: (5059)	Grandparents	Compete Review and Suomit Enroument Packet
Student Name: Medical Information Student Name: Financial Responsibility Agreement Student SN/SIN: Financial Assistance Student film Phone: Stardet Link Student Phone: Stardet Link Student SN/SIN: Request to Volunteer Form City: Program Participation and Release Form State: IL Country: Name: Zin: 6059	Emergency Contacts and Authorized Pickup	Enrollee Information
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Sacred Link Student Email Address: Request to Volunteer Form Street Address: Program Participation and State: IL Release Form Country: Release Form Zin: 60059	 Financial Assistance 	Student Cell Phone:
Street Address: Program Participation and City: Program Participation and State: IL Release Form Country: 1 Country: 1 Country: 1 Date: 005/9 Zan: 005/9	Sacred Link	Student Email Address:
Proquest to Volumeer Partin City: Program Participation and Release Form State: IL Release Form Country: In across Follow Zin: 60059	Description Volumbers Form	Street Address:
	volues: to volumeer Form	City:
Release Form Country: Zan: 60659	 Program Participation and 	State: IL
Zip: 60659	Release Form	Country:
r racis junion	✓ FACTS Tuition	Zhp: 60659

38. Select the Submit Enrollment Packet and Make Payment button.

The submission	of this enrollment packet requires an o	online payment. The fee is as follows:

39. Enter your payment method and information for the registration fees.

ayment	
Back to Online Enrollment	
ke your payment below to submit this enrollr	ment packet.
Online Enrollment	t Payment
Please Provide Payment Information:	
You will pay \$485.00.	
Email address *	
2 D. M. CLC.	
Payment Information	
Payment Information Billing Name *	
Payment Information Billing Name * Bank Account Credit Card	
Payment Information Billing Name *	
Payment Information Billing Name * O Bank Account O Credit Card	

40. Verify your information and select the Pay tab.

Verify Payment

Payment Amount\$485.00A receipt will be emailed to this address.Email AddressBilling NameAccountVISA ending in

If the information above is correct, select "Pay" and your account will be charged the stated amount. If something needs to be modified, please select "Edit Payment" to make your modifications.

Рау	
Edit Payment	

Cancel Payment

41. The following confirmation should appear.

Please return back to your Parent Web account to enroll other students. You will have to go through the same process for each child you wish to enroll.

Enrollment Packet Submitted

Your enrollment packet has been submitted. You will receive an Email from the school once they review and accept the enrollment packet.



Confirmation Number: Payment Date: 05/10/2016 Effective Date: 05/10/2016 Payment Amount: \$485.00 Account Holder's Name: Street: City: State: Zip Daytime Phone: Email: