



2024-2025 SAM FAMILY REFERRAL PROGRAM

THANK YOU!

As a registered SAM Family, you have experienced first-hand what an education at SAM is all about. We are driven on the belief that strong Islamic values, emotional well-being and academic excellence are the foundation of our community's success. We know that one of the best ways to let others know is by word-of-mouth.

The SAM Family Referral Program has been created to recognize student referrals and help fill our campuses. If a family you refer chooses to come to SAM, they will receive a \$50 credit to their account and you will receive a \$100 towards tuition costs.

The best part is that you can refer as many families as you like and reduce your tuition costs by up to the entire amount! If you have any questions, please feel free to contact SAM Administration.

To refer a family, please complete and submit the SAM Family Referral Program Form.

TERMS AND CONDITIONS:

1. The referring family must submit the SAM Family Referral Form prior to the time when the new family submits their application for admission.
2. The referral must be a new family accepted and enrolled for an upcoming academic year. New is defined as never having been enrolled at SAM.
3. The referring family must have been enrolled in the previous academic year.
4. \$50 will be applied to the Referral Family account for the 2024-2025 Academic Year.
5. \$100 will be applied to the Referring Family account for the 2024-2025 Academic Year.
6. The Referral and the Referring Family cannot be living at the same address (please see sibling payment plan).
7. This program is not eligible for SAM employees or their families (please see staff discounts).
8. SAM Families cannot receive more discounts/aid/scholarship/bursaries than the tuition value they are enrolled in.
9. Students who have been awarded the SAM Scholarship Program or the SAM Bursary Program are not eligible for the SAM Family Referral Program.



2024-2025 PARENT/GUARDIAN INFORMATION FORM

Thank you for taking the time to refer a family for the 2024-2025 Academic Year. Please fill out the following information. **PLEASE NOTE: The SAM Family Referral Form must be received prior to the applicant submitting their application.**

A. FAMILY INFORMATION

FAMILY INFORMATION		
Last Name:	First Name:	Phone Number:
Address		Email:
Current Student Names/Grades:		
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

As a current family of SAM, I recommend the family named below to attend SAM. I know this applicant personally and to the best of my knowledge their personal Islamic standards and expectations are in line with SAM Standards.

I have read and agree to the Terms and Conditions outlined in the SAM Family Referral Program.

Signature

Date

B. APPLICANT INFORMATION

APPLICANT INFORMATION		
Last Name:	First Name:	Phone Number:
Address		Email:
New Student Names/Grades:		
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		