



Muslim Center Junior High School

PK-8th Grade

137-58 Geranium Ave. Flushing, NY 11355 Phone: (718) 460-2127 Fax: (718) 460-9727 www.muslimcenterschool.org

October 11, 2017

Dear Parents of 8th Grade,

Assalamualikum wa Rahmatullahi Wa Barakatuh,

The SHSAT will be administered on October 21-22, 2017 at Long Island City High School. We are happy to announce to prepare our students for the examination. Smart Academia will be conducting **Free SHSAT Prep Classes** within the class as well as outside of class at MCJHS. These classes will be beneficial to both, students who will take the exam along with students who are not going to take it as extra practice.

Please Note: We strongly recommend students to attend **ALL** classes including classes that are administered outside of class time. Parents are welcome to sit in with their children as well.

Please see the schedule below:

Sl.No.	Day	Date	Subject	Tutor's Name	From	To
A.	Wednesday	Oct. 11	SHSAT	Muhammad Rashid James Pigman	10:00 am	2:00 pm
1	Thursday	Oct. 12	VERBAL	Charles Raffaele	11:30 am	2:00 pm
2	Friday	Oct. 13	MATH	Omar Rashid	10:00 am	1:00 pm
3	Friday	Oct. 13	MATH	Omar Rashid	3:00 pm	6:00 pm
4	Friday	Oct. 13	VERBAL	James Pigman	3:00 pm	6:00 pm
4	Saturday	Oct. 14	VERBAL	James Pigman	9:00 am	12:00 noon
5	Saturday	Oct. 14	MATH	Omar Rashid	12:30 pm	5:00 pm
6	Sunday	Oct. 15	VERBAL	James Pigman	9:00 am	12:00 noon
7	Sunday	Oct. 15	MATH	Omar Rashid	12:30 pm	5:00 pm
8	Monday	Oct. 16	MATH	Omar Rashid	10:00 am	1:00 pm
9	Monday	Oct. 16	VERBAL	Charles Raffaele	4:30 pm	7:30 pm
10	Tuesday	Oct. 17	VERBAL	Charles Raffaele	11:30 am	2:00 pm
11	Wednesday	Oct. 18	VERBAL	Charles Raffaele	4:30 pm	7:30 pm
12	Thursday	Oct. 19	STRATEGIES AND BACK UP PLAN	Muhammad Rashid	10:00 am	3:00 pm

We hope you enjoy this service and take full advantage of it, Insha Allah.

Sincerely,

Mrs. Farooqi
Principal

Please Sign and Return the Slip no later than October 12, 2017:

Permission Slip

Yes () No () My son/daughter _____ (doesn't have) (has) the permission to participate in this great opportunity with other students.

Please specify the dates you want your child to participate in or write "All" for all classes:

Name of parent / guardian

Signature of parent / guardian