APPLICATION FOR ADMISSION TO HIGH SCHOOL



Note: This form must be completed in full. All changes to be initialed or signed by parent / guardian. Completing the form does not necessarily mean that the learner has been accepted into the school.

CHILD'S PARTICULARS	
Grade Applied For:	thest Grade Passed Year When Grade was passed
Surname:	Initials:
First Name:	Other Names:
Date of Birth: YYYY MM DD	Gender: Male: Famale
Nationality:	Identification or Birth Certificate No:
Country of Origin:	Citizenship:
Physical Adress:	Home Telephone:
	Emergency Telephone:
City/Surburb:	Cell:
Code: Parent Ema	ail Adress:
Home Language:	
Deceased Parent Mother	Father Mode of Transport:
Religion: For Grade	1 only: Indicate pre-primary education None Non Formal Formal
Previous School Information	
Name of Previous School:	
Previous School Adress:	
Learner Medical Information	
Special Health Problems	
Dexterity of Learner: Right Handed Left H	Handed Social Grant YES NO
Submit:	
Progress Report from Previous School Copy of Birth Certificate	3. Transfer Letter from previous school

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Siblings In this School								
Number of children at this so	hool	Positio	n in th	e family (e.g first)				
Name:				Grade:]		
Name:				Grade:		7		
				1		- -		
Name:				Grade:				
Parent / Guardian Informatio	n Coi	ကplete a SEPARATE န	parent	form each parent living at dif	fferent physi	cal address	1	
Title: Initials:	Surname:							
First Name:	Gender:	Male Female	e					
		Nationality:				٦		
Home Language:		ivationality.						
Identification Number:				Account Payer		Yes	No	
Residential Adress:				Code:				
Occupations								
Occupation: Surname of Spouse:				Employer: First Name:				
					ront/c	vos	No	$\overline{}$
Occupation of Spouse:			퓜	Learner resides with this pa	arent/s	yes	No	
Spouse ID Number			Ш	Relationship to Learner:				
Correspondence Details								
Title: Surname:								
Postal Adress:								
				Code:				
Other Contact Details								
Home Telephone:			Sno	use Work Telephone:				
Cell Number:	i i			use Cell Number:		l		
Work Telephone:				•		•		
E-Mail Adress:			Spo	use E-Mail Adress:				
I hereby declare that to the b	est of my knowl	edge, the above info	rmatio	n as supplied is accurate and c	correct.			
Name of Parent ? / Guardian	(Please Print):							
Signature of Parent / Guardia	ın :							
YY	MM D	D						
Date:	/							
Office use only								
1. Date:		2.Accepted:		3.Accession Numb	er:			
4.Rejected:	1	5.Reason for	Reject	ion:				
6 Documentation Received:	6 (i) Immunis	ation Record:		6 (ii) Birth Certifica	ate:			
6 (iii) Progress Report from Pre	vious School:			6 (iv) Transfer Letter from F	Previous Scho	ool:		
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