



SOUTH AFRICAN COLLEGE HIGH SCHOOL

Newlands Ave, Newlands 7700 | Private Bag Newlands 7725

Tel: +27(0)21-689-4164 | Fax: +27 (0)21-685-2669

Email: innesi@sacollege.org.za

www.sacollege.org.za

Attach ID photo
here

APPLICATION FOR ADMISSION – Closing date is 11 March 2016

Name of Learner:		
Grade applying for:		
Year applying for:	2017	
Application for: <i>(Tick applicable boxes)</i>	DAY SCHOLAR	
	BOARDER – Rosedale Gr10 -G12	
	BOARDER – Michaelis Gr8 – Gr9	

Please read the Admission Policy of South African College High School (the “**School**”) before submitting this application form. Once submitted, your application form will be processed in accordance with the School’s Admission Policy.

Please complete all sections of this application form using capital letters and submit it together with all supporting documents to the School on or before the relevant closing date.

Please complete a separate application for each child for whom admission is required.

Please contact the Headmaster’s Office should you have any queries or require assistance with the completion of this application.

Headmaster	Mr K Ball
Secretary in the Admission’s Office	Irene Innes
Telephone Number	0216894164 ext 107
Fax Number	0216852669
Email Address	innesi@sacollege.org.za
Postal Address	Private Bag Newlands 7725
Physical Address	Newlands Avenue Newlands 7700

FOR OFFICE USE ONLY:				
RECEIVED ON:			APPLICATION RECEIVED BY:	
REFERENCE NUMBER:			NECESSARY DOCUMENTS RECEIVED:	YES NO
APPLICATION STATUS:	SUCCESSFUL		OFFER STATUS: (applicable to successful applicants only)	ACCEPTED DECLINED
	UNSUCCESSFUL			
DEPOSIT RECEIVED: (applicable when offer accepted)	YES	NO	RECEIPT NUMBER:	

Initials of the Parents / Guardians:
Initials of Sponsor (if applicable):

SECTION A: PERSONAL INFORMATION OF THE LEARNER

Learner's Surname	Learner's First Name(s)
-------------------	-------------------------

(THE "LEARNER")

Identity Number		Current Age	
Gender		Age in Year of Admission	
Date of Birth		Place of Birth	
Home Language		Preferred Language for Learning and Teaching	
Nationality		Citizenship	
Date of Arrival in SA		Religion	
Current School		Current Grade	
Previous School		Number of Siblings	
Siblings currently at South African College High School	Name:	Grade:	Age:
	Name:	Grade:	Age:

Important: Please attach the following to this application form:

- **A copy of the learner's birth certificate (or proof that application has been made to the Department of Home Affairs or the relevant authority for a birth certificate where no birth certificate is immediately available)**
- **The original transfer certificate from the last school that the learner attended at the date of this application. Should the transfer card be unavailable, the applicant must provide the School with one of the following:**
 - **The latest original report card (or equivalent document) issued by the previous school; or**
 - **A written affidavit of the parent signed before a Commissioner of Oaths (stating the reason for not having a transfer card and the grade the learner attended at the previous school)**
- **If the learner is not a South African citizen, a certified copy of any permit or the like permitting the learner to live in South Africa (or proof that formal steps have been taken to legalise the learner's stay in South Africa where the relevant permit is not immediately available)**

THE LEARNER'S PARTICIPATION IN SPORTING ACTIVITIES

Please include below details of the sporting in which the learner is currently involved, as well as details of any sporting achievements of which the learner is proud.

Sporting Activities and Achievements	
---	--

It is compulsory for learners admitted to the School to participate in sporting activities. Learners will only be excused from participating in sporting activities for valid medical reasons.

THE LEARNER'S PARTICIPATION IN CULTURAL ACTIVITIES

Please include below details of the cultural activities in which the learner is currently involved, as well as details of any cultural achievements of which the learner is proud.

Cultural Activities and Achievements	
---	--

It is compulsory for learners admitted to the School to participate in cultural activities unless. Learners will only be excused from participating in cultural activities for valid reasons.

THE LEARNER'S PARTICIPATION IN SERVICE ACTIVITIES

Please include below details of the service activities in which the learner is currently involved, as well as details of any service achievements of which the learner is proud.

Service Activities and Achievements	
--	--

It is compulsory for learners admitted to the School to participate in service activities unless. Learners will only be excused from participating in service activities for valid reasons.

THE LEARNER'S LEADERSHIP EXPERIENCE

Please include below details of the leadership gained by the learner to date, as well as details of any leadership achievements of which the learner is proud.

Leadership Experience and Achievements	
---	--

THE LEARNER'S PARTICIPATION IN RELIGIOUS ACTIVITIES

Please include below details of the religious activities in which the learner is currently involved.

Religious Activities	
-----------------------------	--

Please indicate below whether you would have any objections to the learner participating in religious activities at school and, if so, please detail your objections.

Do you have any objections to the learner participating in religious activities at school?	YES	NO
If YES, please explain your objections		

SECTION B: MEDICAL INFORMATION OF THE LEARNER

WHICH OF THE FOLLOWING ILLNESSES HAS THE LEARNER BEEN IMMUNISED AGAINST?

Polio		Diphtheria	
Measles		Tetanus	
Tuberculosis		Hepatitis B	

Important: Immunisation against these illnesses is compulsory before the learner attends any school. Please attach proof of immunisation to your admission application.

MEDICAL AID DETAILS FOR THE LEARNER			
Member's Name		Name of Medical Aid Scheme	
Membership Number		Name of Medical Aid Plan	

DOCTOR'S DETAILS		EMERGENCY CONTACT PERSON (IF PARENTS ARE NOT AVAILABLE)	
Doctor's Full Name		Full Name	
Telephone Number		Relationship to the Learner	
Doctor's Cell Number		Home Telephone Number	
		Cell Number	
		Work Telephone Number	

MEDICAL DETAILS OF THE LEARNER

Please disclose full details of any medical information concerning the learner that the School should be aware of below:

Allergies	
Recent Injuries	
Routine Medication	
Previous Operations	
Current Medical Problems	
Learning Disabilities	
Other Medical Conditions	

WHO DOES THE LEARNER LIVE WITH?

Mother		Father		Sponsor	
Guardian		Grandparent		Other (please specify)	
Residential Address of the Learner:					

IF ADMITTED TO THE SCHOOL AS A DAY SCHOLAR, HOW WOULD THE LEARNER TRAVEL TO/FROM THE SCHOOL?

Walking		Car / Lift Club		Public Train	
Bicycle		Public Bus or Taxi		Other (please specify)	
Not applicable					

How far would the learner have to travel to get to and from school each day?

Less than 5km		Between 5km and 15km		Between 15km and 25km		More than 25km	
Not applicable							

IF YOU WISH FOR THE LEARNER TO BE ADMITTED AS A BOARDER IN ONE OF THE SCHOOL'S HOSTELS, PLEASE MOTIVATE WHY THE LEARNER REQUIRES HOSTEL ACCOMODATION:

Motivation for Hostel Accommodation	
Not applicable	

Initials of the Parents / Guardians:
Initials of Sponsor (if applicable):

SECTION C: PERSONAL INFORMATION OF THE LEARNER'S PARENTS / GUARDIANS

PARENT 1					PARENT 2				
Title and Initials:					Title and Initial:				
First Name(s):					First Name(s):				
Surname:					Surname:				
Marital Status	Single		Divorced		Marital Status	Single		Divorced	
	Married		Remarried			Married		Remarried	
	If remarried, please provide step-parent's details below.					If remarried, please provide step-parent's details below.			
Home Telephone Number					Home Telephone Number				
Cell Phone Number					Cell Phone Number				
Email Address					Email Address				
Work Telephone Number					Work Telephone Number				
ID Number					ID Number				
Residential Address					Residential Address				
	Postal Code					Postal Code			
Postal Address (if different to Residential Address)					Postal Address (if different to Residential Address)				
	Postal Code:					Postal Code:			

STEP-PARENT 1 (MARRIED TO PARENT 1)		STEP-PARENT 2 (MARRIED TO PARENT 2)	
Title and Initials		Title and Initials	
First Name(s)		First name	
Surname		Surname	
Gender		Gender	
ID Number		ID Number	
Home Telephone Number		Home Telephone Number	
Cell Phone Number		Cell Phone Number	
Work Telephone Number		Work Telephone Number	
Email Address		Email Address	
Fax Number		Fax Number	

Important: Please attach the following to your admission application:

- A copy of the ID documents for the learner's parents (and step-parents, if applicable)
- Proof of ALL residential address(es) indicated above, including the residential address of the learner (e.g. a copy of a title deed, an existing lease agreement, or a utility bill or bank statement not older than 3 months).

THE FOLLOWING SECTION MUST BE COMPLETED FOR THE GUARDIAN(S) OF THE LEARNER (IF APPLICABLE):

GUARDIAN 1			GUARDIAN 2		
Surname			Surname		
First Name(s)			First Name(s)		
Gender			Gender		
Title and Initials			Title and Initials		
ID Number			ID Number		
Home Telephone Number			Home Telephone Number		
Cell Phone Number			Cell Phone Number		
Work Telephone Number			Work Telephone Number		
Email Address			Email Address		
Fax Number			Fax Number		
Relationship to the Learner	Guardian		Relationship to the Learner	Guardian	
	Grandparent			Grandparent	
	Foster Parent			Foster Parent	
	Other: (please specify)			Other: (please specify)	

Important: Please attach the following to your admission application:

- A copy of the ID documents for the learner's guardian (if applicable)
- Proof of ALL residential address(es) indicated above, including the residential address of the learner (e.g. a copy of a title deed, an existing lease agreement, or a utility bill or bank statement not older than 3 months).

IF THE LEARNER IS ADMITTED TO THE SCHOOL, WHO SHOULD RECEIVE THE SCHOOL REPORT?

Mother		Father		Sponsor	
Guardian		Grandparent		Other (please specify)	

IF THE LEARNER IS ADMITTED TO THE SCHOOL, WHO SHOULD RECEIVE CORRESPONDENCE FROM THE SCHOOL (INCLUDING NOTICES AND FEES ACCOUNT)?

Mother		Father		Sponsor	
Guardian		Grandparent		Other (please specify)	

SECTION D: SCHOOL FEES

The annual school fees payable for 2017 are as follows:

GRADE 8	R 37 300 per annum for one learner
GRADE 9	R 37 300 per annum for one learner
GRADE 10	R 37 300 per annum for one learner
GRADE 11	R 37 300 per annum for one learner
GRADE 12	R 37 300 per annum for one learner

Please note that the annual school fees payable to the School may increase annually.

SCHOOL FEES			
Please indicate who will be responsible for paying the annual school fees	Parent 1	Guardian 1	Sponsor who will be responsible for the payment of school fees:* (please complete the table below)
	Parent 2	Guardian 2	

* PERSONAL DETAILS OF THE SPONSOR			
Surname		First Name(s)	
Title and Initials		Gender	
ID / Passport Number		Cell Phone Number	
Home Telephone Number		Home Address	
Preferred Postal Address	Postal Code:	Fax Number	
Email Address		Work Telephone Number	

Important: Please attach the following to your admission application:

- A copy of the ID documents for the sponsor responsible for paying the annual school fees (if applicable)
- Proof of the residential address of the sponsor (e.g. a copy of a title deed, an existing lease agreement, or a utility bill or bank statement not older than 3 months).

Note: Every parent/guardian has the right to apply for an exemption from the payment of the annual school fees should they not be in a position to pay these fees in full. Please consult the relevant provisions of the School's Admission Policy for more information on how to apply for such an exemption.

SECTION E: DECLARATION BY PARENTS / GUARDIANS OF THE LEARNER

I/We the undersigned parent(s)/guardian(s) of the learner:

FULL NAME OF LEARNER

do hereby confirm and declare the following:

1. I/We have received a copy of the School's Admission Policy and have carefully considered and understand its contents, including but not limited to the admission criteria that will be applied and the processes that will be followed by the School;
2. I/We have the legal authority to sign and submit this application and consider the School's Admission Policy and the commitments made in this application to be binding on me/us personally;
3. The information and documents provided as part of this this application are true and correct;
4. I/We understand that the School reserves the right to verify all information supplied in this application and reserves its rights to take legal action against any applicant who intentionally provides false information and documentation;
5. I/We understand that submission of this application does not guarantee that the learner will be admitted to the School and that all applications for admission received by the School will be considered in terms of the School's Admission Policy. I/We understand that it is our responsibility to apply to other schools to ensure that the learner is accommodated elsewhere should he/she not be admitted to the School;
6. I/We understand and accept that I/we are responsible for ensuring that the learner has been immunised against the following communicable diseases before he/she attends school: Polio, Measles, Tuberculosis, Diphtheria, Tetanus and Hepatitis B;
7. Should this application be successful and the learner be admitted to the School (which I/we understand and accept is not a guarantee):
 - 7.1. I/We accept that the responsibility for paying the annual school fees rests with me/us and hereby undertake to pay in full the annual school fees determined by the governing body of the School and agreed to by the parent body at the annual budget meeting (which fees are set out above);
 - 7.2. I/We understand and accept that we are liable to pay compulsory school fees and the School may enforce payment of such fees in terms of the South African Schools Act. Should the School enforce payment of any outstanding school fees and need to take legal action to recover these fees, I/we hereby undertake to pay all legal costs incurred by the School in this regard (including but not limited to attorney/client fees);
 - 7.3. I/We understand that I/we may apply to the School for an exemption from paying the compulsory school fees should I/we not be in a position to pay these fees in full. I/We understand and accept that the submission of an application for a fee exemption does not guarantee any reduction in the compulsory school fees payable by me/us. I/We understand that I/we may request

assistance from the School in completing the application process in this regard. I/We also accept that we shall be liable to pay the annual school fees should my/our application for a fee exemption not be successful or not cover all school fees payable;

- 7.4. I/We acknowledge and accept the authority of the Headmaster and educators employed at the School and authorise the Headmaster (or his delegate) to act in *loco parentis* while the learner is involved in school-related activities, which authority shall include but shall not be limited to granting consent for medical treatment in the case of an emergency where all reasonable efforts to contact the learner's parents have been made;
- 7.5. I/We shall ensure that the learner attends school regularly; shall ensure that the learner is able to get to and from school; and shall notify the School in writing should the learner be absent from school for any reason. I/We understand and accept that a doctor's certificate may be required in some instances where the learner is absent from school;
- 7.6. I/We hereby agree to ensure that the learner abides by the School's code of conduct and any rules which underpin the code of conduct (including but not limited to all amendments to the code of conduct and/or rules that are made from time to time);
- 7.7. I/We accept that the School cannot be held liable for any loss or damage to a learner's property;
- 7.8. I/We accept that I/we shall be held liable to the School for the cost of repairing any damage to the School's property caused by the learner; and
- 7.9. I/We shall give the Headmaster of the School at least one school term's notice, in writing, in the event the learner leaving the School. In addition, I/we undertake to return all text books and other property belonging to the School before the learner leaves the School.

This done and signed at _____ (place) on this ____ day of _____ (month) _____ (year).

PARENT 1 / GUARDIAN 1

PARENT 2 / GUARDIAN 2

**SPONSOR RESPONSIBLE
FOR THE PAYMENT OF
SCHOOL FEES (if
applicable)**

PLEASE COMPLETE THE ATTACHED DECLARATION REGARDING EXEMPTIONS FROM THE PAYMENT OF THE ANNUAL SCHOOL FEES.

SECTION F: DECLARATION BY PARENTS/GUARDIANS REGARDING EXEMPTIONS FROM PAYMENT OF ANNUAL SCHOOL FEES

(Please mark with a cross in the applicable box)

1	Has the Headmaster of the School and/or his delegate informed you about the amount of annual school fees to be paid?	YES	NO
2	Has the Headmaster of the School and/or his delegate informed you that you are liable for the payment of school fees unless you are totally exempted from paying school fees?	YES	NO
3	Has the Headmaster of the School and/or his delegate informed you about your right to apply for exemption from paying school fees?	YES	NO
4	Do you wish to apply for an exemption from paying school fees?	YES	NO
5	Do you wish to be assisted in applying for an exemption from paying school fees?	YES	NO
6	Has the Headmaster of the School and/or his delegate provided you with the relevant application form?	YES	NO
7	Do you require a copy of the <i>Regulations for the Exemption of Parents from the Payment of School Fees</i> published in terms of the South African Schools Act (which sets out the formulae to apply when determining whether an applicant qualifies for a fee exemption)?	YES	NO

FULL NAME OF THE HEADMASTER		SIGNATURE OF THE HEADMASTER	DATE:
FULL NAME OF PARENT 1 / GUARDIAN 1		SIGNATURE OF PARENT 2 / GUARDIAN 2	DATE:
FULL NAME OF PARENT 2 / GUARDIAN 2		SIGNATURE OF PARENT 2 / GUARDIAN 2	DATE:
SCHOOL STAMP			DATE:

Initials of the Parents / Guardians:
Initials of Sponsor (if applicable):