

HOËRSKOOL GRASSDALE HIGH SCHOOL

VIERDELAAN
GRASSY PARK
7941
TELEFAX: (021) 706 1816



FOURTH AVENUE
GRASSY PARK
7941
FAX/FAKS: 086 587 5704

PRINCIPAL: D.TREGONNING
E-MAIL: admissions@grassdalehigh.org.za

APPLICATION FOR ADMISSION: 2018

OFFICE USE ONLY:

Application number:

Date issued:

Date Returned:

GRADE	8	9	10	11	12
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SECTION A: LEARNER INFORMATION

SURNAME	
FIRST NAMES	
DATE OF BIRTH	
IDENTITY NUMBER	
PASSPORT NO (FOREIGN CITIZEN)	
GENDER	
COUNTRY OF BIRTH	
HOME LANGUAGE	
RELIGION	
NO OF CHILDREN IN FAMILY	
SIBLINGS AT GRASSDALE HIGH SCHOOL	
FOSTER CHILD	
HOME ADDRESS	
POSTAL CODE	
TELEPHONE NUMBER (HOME)	
PREVIOUS SCHOOL	
LAST YEAR ATTENDED	
HIGHEST GRADE PASSED	
SCHOOL TELEPHONE NUMBER	

ANY MEDICAL INFORMATION THAT SCHOOL MUST BE AWARE OF	
FAMILY DOCTOR	
DOCTOR TELEPHONE NUMBER	
MEDICAL AID	
MAIN MEMBER	
MEDICAL AID NUMBER	
LEARNING DIFFICULTIES FOR WHICH LEARNER HAS RECEIVED THERAPY (IF APPLICABLE)	
INTERNET ACCESS AT HOME	YES NO

SECTION B: PARENT/GUARDIAN INFORMATION

PARENT (FATHER)/GUARDIAN NO. 1	
SURNAME	
FULL NAMES	
IDENTITY NUMBER	
PASSPORT NUMBER (FOREIGN CITIZEN)	
COUNTRY OF BIRTH	
HOME LANGUAGE	
HOME ADDRESS	
TELEPHONE NUMBER (HOME)	
(MOBILE)	
(WORK)	
EMAIL ADDRESS	
NAME OF EMPLOYER	
ADDRESS OF EMPLOYER	

PARENT (MOTHER)/GUARDIAN NO. 2	
SURNAME	
FULL NAMES	
IDENTITY NUMBER	
PASSPORT NUMBER (FOREIGN CITIZEN)	
COUNTRY OF BIRTH	
HOME LANGUAGE	
HOME ADDRESS	

TELEPHONE NUMBER (HOME)	
(MOBILE)	
(WORK)	
EMAIL ADDRESS	
NAME OF EMPLOYER	
ADDRESS OF EMPLOYER	

INFORMATION REGARDING FRIEND OR FAMILY MEMBER AS A CONTACT PERSON IN CASE OF AN EMERGENCY

RELATIONSHIP TO LEARNER	
TITLE AND FULL NAME	
TELEPHONE NUMBER	
ADDRESS	

DECLARATION OF PARENT/GUARDIAN

We, the undersigned parent/guardian ofhereby declare that the information furnished above is correct to the best of our knowledge.

SIGNED AT: on this day of(month) (year)

SIGNATURE OF FATHER/GUARDIAN: _____

SIGNATURE OF MOTHER/GUARDIAN: _____

INFORMATION VERIFIED BY: _____

DATE: _____

IF YOUR CHILD IS A FOREIGN NATIONAL YOU WILL BE REQUIRED TO OBTAIN A STUDY PERMIT FROM THE SOUTH AFRICAN DEPARTMENT OF HOME AFFAIRS.

SECTION C: SCHOOL FEES

TERMS AND CONDITIONS IN CONNECTION WITH THE PAYMENT OF SCHOOL FEES	
<p>1. In the case where legal action has to be instituted to recover overdue school fees, the parent/guardian agrees to and accepts responsibility of the:</p> <p>2.1 legal costs on the scale agreed upon between the client and attorneys;</p> <p>2.2 interest at a rate of 15,5 % per annum from the date by which the outstanding debt becomes claimable and payable;</p> <p>2.3 collection commission at a rate of 10%.</p>	
METHOD OF PAYMENT	TICK
<p>Please take note that all parents need to pay a registration fee of R600 per child before the end of January (Includes existing learners). Thereafter, the following options apply:</p>	
i) Option 1 – Full payment by end of March (R100 discount)	
ii) Option 2 – Full payment by the end of June (R50 discount)	
iii) Option 3 – 9 monthly instalments (Feb – Oct) (Deposit excluded)	
iv) Option 4 – (By arrangement only) 10 monthly instalments (Jan – Oct)	
<p>You may apply to pay off your amount per month by completing and signing a debit order form at your bank and providing office with proof. If you have any queries with this arrangement please contact the school.)</p>	
UNDERTAKING BY PARENTS/GUARDIANS:	
<p>I will pay the compulsory school fees of my child promptly. In the case of unexpected financial difficulties, or where my circumstances change and I am unable to comply with my obligations, I undertake to contact the school Financial Officer immediately. I acknowledge that the School Governing Body manages all decisions regarding the finances of the school.</p>	

SIGNATURE OF FATHER/GUARDIAN 1

DATE

SIGNATURE OF MOTHER/GUARDIAN 2

DATE

SECTION D: LEARNER COMMITMENT FORM

1	What type of learner /person are you?
2	As a grade 8 learner you will now become the juniors at GRASSDALE HIGH SCHOOL, how will this change affect you?
3	Why did you choose to apply to GRASSDALE HIGH SCHOOL?
4	Do you participate in sport and/or cultural activities at your school? If yes, provide details of your membership and level of participation.
5	What type of leadership roles do you see yourself fulfilling at GRASSDALE HIGH SCHOOL?
6	What positive contribution will you make at GRASSDALE HIGH SCHOOL?
7	Do you see yourself fulfilling any other roles, not mentioned before, at GRASSDALE HIGH SCHOOL? Explain.

SIGNATURE OF LEARNER

DATE

SECTION E : LEARNER INDEMNITY FORM

1	<p>CODE OF CONDUCT</p> <p>Please initial.</p>	<p>I acknowledge and take note of the rules, endeavours and the ethos of the school and will do everything possible to inculcate these values in my child so that he/she may identify and express them at all times.</p> <p>I identify and take note of the school code of conduct and the procedures that go hand in hand with the above mentioned.</p> <p>I will assist my child and help the school in the enforcement of the code of conduct as long as he/she is a learner at Grassdale High School.</p>
2	<p>SPORT</p> <p>Please initial.</p>	<p>I acknowledge and take note of the Sport Policy of the school and understand that sport is compulsory at Grassdale High School.</p> <p>I will support my child in the sporting code that he /she choose to participate in.</p> <p>I understand the only reason for non-participation in a sport is a valid medical certificate.</p>
3	<p>CULTURAL</p> <p>Please initial.</p>	<p>I acknowledge and take note of the Cultural Policy of the school.</p> <p>I will support my child in the cultural code that he /she choose to participate in.</p> <p>I understand the only reason for non-participation in a cultural event is a valid medical certificate.</p>
4	<p>INDEMNITY</p> <p>Please initial.</p>	<p>I give permission for my child to participate in sport/tours/outings/cultural activities as long as he/she is enrolled at Grassdale High School.</p> <p>I understand that the above mentioned activities will be taken at own risk.</p> <p>I further undertake to indemnify the school, principal, educators, the WCED and the School Governing Body of any claims that may arise from any damage, loss or injuries that my child might suffer due to whatever reason during such an activity, in spite of the necessary precautions having been taken.</p>

SIGNATURE OF FATHER/GUARDIAN 1

DATE

SIGNATURE OF MOTHER/GUARDIAN 2

DATE

APPLICATION CHECK LIST:

NAME OF APPLICANT: _____

DATE: _____

PLEASE NOTE THE FOLLOWING:

SUBMISSION OF THIS FORM DOES NOT GUARANTEE ACCEPTANCE. PARENTS NEED TO APPLY TO OTHER SCHOOLS AS WELL

THIS APPLICATION MUST BE ACCOMPANIED BY THE FOLLOWING DOCUMENTS:

1	All sections of the application form completed	
2	A certified copy of the child's unabridged birth certificate	
3	Certified copies of both parents/guardians ID documents	
4	Copy of child's Final Grade 6 Report	
5	Copies of child's latest Grade 7 Reports	
6	Certified proof of residential address of the child (rates account or utility account)	
7	HOME AFFAIRS Document for foster child	
8	ID photo of child	
9	Postage paid self-addressed envelope	