

2024



APPLICATION FOR ADMISSION – GR 8

Place
photo
here

Application for	2	0	2	4															Into Grade					
Surname																								
Full Names																								
Known as																								
Identity Number																								
				<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>Y</i>	<i>M</i>	<i>M</i>	<i>D</i>	<i>D</i>													
Date of Birth																								
Contact Number PARENT/GUARDIAN																		Gender		M	F			

FAMILY INFORMATION	NAME & SURNAME	GRADE(2023)
RELATIVES IN THIS SCHOOL		

For Office use only										
School										
Applied	Y	N	No Reason							
Selected	Y	N								
Letter	Date		Signature							
Admission number									Date of admission	

APPLICATION FOR ADMISSION – 2024



ETHEMBENI
ENRICHMENT CENTRE
Avoiding the soft option

PLEASE COMPLETE WITH A BLACK PEN

DO YOU HAVE ANY LEARNERS CURRENTLY/PREVIOUSLY IN THIS SCHOOL?

☐ Y

☐ N

Name of other learner(s) _____

LEARNER INFORMATION

Full names: _____
Surname _____
Nick name _____
Date of Birth _____
ID number _____
Nationality ☐ RSA ☐ Other _____
Religious denomination _____
Gender ☐ Male ☐ Female
Ethnic group _____
Home Language ☐ IsiXhosa ☐ English ☐ Other _____
Learner cell phone number _____
Grade in 2023 _____
Years in grade for 2023 _____
Dexterity of learner Right Handed ☐ Left Handed ☐ Social ☐
Grant – Yes /No _____
With whom does the child stay?(Please tick ✓)
Both Parents ☐ OR Father ☐ OR Mother ☐ OR
Guardian _____
Method of transport ☐ Private ☐ Taxi ☐ Bus

NEXT OF KIN INFORMATION

Name _____
Contact number _____
Alternative contact number _____
Relation _____

LEARNER HEALTH INFORMATION (any medical condition)

Chronic diseases _____
Allergies _____
Medication _____

MEDICAL AID INFORMATION

Name: _____
Telephone number : _____
Member number: _____
FAMILY DOCTOR INFORMATION
Name: _____
Telephone Number: _____
Business Number: _____

FAMILY INFORMATION

Family status: ☐ Both parents ☐ Single parent – unmarried
☐ Foster care ☐ Single parent - divorced
☐ Widow/Widower ☐ Other

Parents deceased ☐ Mother ☐ Father ☐ None

INFORMATION OF PREVIOUS SCHOOL

First registration of learner in Eastern Cape ☐ YES ☐ NO

Learner attended school last year ☐ YES ☐ NO

If YES, in which Province/Country _____

Name of Previous School: _____

Telephone Number: _____

Address: _____

Province: _____

OFFICE USE ONLY

FAMILY CODE	
REGISTER CLASS	
ADMISSION NUMBER	
ID COPY	
TRANSFER CARD	
REPORT CARD	
BIRTH CERTIFICATE	

PARENT INFORMATION	
PARENT/GUARDIAN (1) INFORMATION Title: _____ Full names: _____ Surname: _____ Initials: _____ Nick Name: _____ ID number: _____ Home Language: <input type="radio"/> IsiXhosa <input type="radio"/> English <input type="radio"/> Other Communication preference <input type="radio"/> SMS <input type="radio"/> By hand Cell phone number: _____ Home Tel. No.: _____ Residential address: _____ _____ Fax : _____ Email: _____	
PARENT/GUARDIAN (2) INFORMATION (COMPULSORY) Title: _____ Full names: _____ Surname: _____ Initials: _____ Nick Name: _____ ID number: _____ Home Language: <input type="radio"/> IsiXhosa <input type="radio"/> English <input type="radio"/> Other Communication preference <input type="radio"/> SMS <input type="radio"/> By hand <input type="radio"/> Email Cell phone number : _____ Home Tel. No.: _____ Residential address: _____ _____ Fax: _____ Email: _____	
Postal address: _____ _____ _____ OCCUPATION <input type="radio"/> Own employer Non-Professional <input type="radio"/> Own employer Professional <input type="radio"/> House wife <input type="radio"/> Part time <input type="radio"/> Contract worker <input type="radio"/> Pensioner <input type="radio"/> Student <input type="radio"/> Temporary <input type="radio"/> Full time <input type="radio"/> Unemployed Occupation: _____ Employer: _____ Work Telephone number: _____ Employer physical address: _____ _____ Is the learner living with this parent <input type="radio"/> Yes <input type="radio"/> No	
Postal address: _____ _____ _____ OCCUPATION <input type="radio"/> Own employer Non-Professional <input type="radio"/> Own employer Professional <input type="radio"/> House wife <input type="radio"/> Part time <input type="radio"/> Contract worker <input type="radio"/> Pensioner <input type="radio"/> Student <input type="radio"/> Temporary <input type="radio"/> Full time <input type="radio"/> Unemployed Occupation: _____ Employer: _____ Work Telephone number: _____ Employer physical address: _____ _____ Email: _____ Is the learner living with this parent <input type="radio"/> Yes <input type="radio"/> No	

NB: Both parents of the child MUST complete the above information. If parent is deceased, a certified copy of the death certificate must be attached.

I, _____ (Name of Parent/Guardian), hereby declare that the information supplied in this form is true and just that I, by way of my signature hereunder, authorise the Chairperson of the school Governing Body or his/her representative to control and confirm any of the details supplied. I am aware that should any information supplied be found not to be true, I may be liable to a criminal offence.

Signed at _____ on _____ day of _____ 2023

Signature of Parent/Guardian: _____

ACCOUNTABLE PERSON'S INFORMATION

☐ Parent 1 OR ☐ Parent 2 OR ☐ Other

Please complete section A or B below:

A) INDIVIDUAL

Title: _____

Full names: _____

Surname: _____

Initials: _____

Nick Name: _____

ID number: _____

Home Language: ☐ IsiXhosa ☐ English ☐ Other

Communication preference ☐ SMS ☐ By hand ☐ E-mail

Cell phone number: _____

Home Tel. No.: _____

Residential address: _____

E-mail address: _____

Only if "Other":

B) COMPANY / CLOSED CORPORATION / TRUST

Title: _____

Name: _____

Registration No: _____

Language preference: _____

Contact No: _____

Fax No: _____

Business address : _____

Postal address: _____ -

Postal Code: _____

E-mail address: _____



ETHEMBENI
ENRICHMENT CENTRE

CONFIDENTIAL REPORT

**FORM TO BE COMPLETED BY YOUR CHILD'S PRESENT SCHOOL
(Learner Particulars)**

The following learner is applying to attend the Ethembeni Enrichment Centre. Kindly complete this form in full and hand it back to the Parent.

1. **NAME OF LEARNER:** _____

2. **NAME OF PRESENT SCHOOL:** _____

3. **SCHOOL TELEPHONE NUMBER:** _____

4. **FAX:** _____

5. **PRESENT GRADE:** _____ **NUMBER OF YEARS IN PHASE:** _____

6. **GRADES REPEATED:** _____

7. **BEHAVIOUR/ATTITUDE:**

8. **EXTRA MURAL ACTIVITIES:**

9. **PLEASE INDICATE IF FEES ARE PAID UP TO DATE: YES OR NO** _____

10. **MEANS OF PAYMENT :** (Tick ✓ the appropriate one)

CASH	<input type="radio"/>	ELECTRONICALLY	<input type="radio"/>	REGULAR PAYMENT	<input type="radio"/>
NO PAYMENT	<input type="radio"/>	FEE EXEMPTION	<input type="radio"/>	IRREGULAR PAYMENT	<input type="radio"/>

11. **OTHER COMMENTS:**

DATE: _____

SIGNATURE OF PRINCIPAL: _____

SCHOOL STAMP

INDEMNITY FORM

Whilst every reasonable care will be taken to ensure the safety of my child, I accept that the Ethembeni Enrichment Centre, it's management, staff members and helpers cannot be held responsible for any accident or injury which may, for whatever reason, occur to my child whilst in the care of the Ethembeni Enrichment Centre or whilst on the property known as the Ethembeni Enrichment Centre.

Furthermore, as my child will, from time to time, be taken on excursions, I hereby grant permission for my child to participate in the various excursions, which will be arranged by the school. I understand that I will be advised, in writing, about excursions in advance via my child.

I certify that the information contained herein is true and correct and that I hereby agree to the above.

NAME OF PARENT/ : _____
GUARDIAN

SIGNATURE OF PARENT/ : _____
GUARDIAN

DATE : ____/____/____

Thank you for considering **ETHEMBENI ENRICHMENT CENTRE** for your child.

We are grateful that you are applying to our School, but do ask you to keep in mind that we have many learners applying annually to be enrolled at our school and unfortunately only a few places are available. We therefore, suggest that you apply to more than one school.

Transport is an important consideration when applying at the **ETHEMBENI ENRICHMENT CENTRE**.

We do not provide transport therefore you must make sure that your child arrives timeously at school at all times. You need to budget for this expense.

ENROLMENT PROCEDURE:

Step 1:

- Please complete the Admission form and hand deliver it, with all the relevant documents, at the office of **ETHEMBENI ENRICHMENT CENTRE** by **no later than 28 April 2023.**
- **NO LATE SUBMISSIONS WILL BE ACCEPTED.**
- Your application will only be considered if the following documents are included:
 1. Copy of Birth Certificate of the Learner;
 2. ID photograph of the Learner;
 3. Latest school's report;
 4. Copies of the ID documents of **BOTH** parents/guardians;
 5. Copies of pay slip for both parents/guardians;
 6. Proof of residential address.

Step 2:

- ONLY successful applications will be informed telephonically.
- If your child is accepted at **ETHEMBENI ENRICHMENT CENTRE** you will be contacted telephonically by **31 May 2023.**
- Should your application be successful you need to report to the school office within **5 working days** to sign a letter of acceptance and pay the **R5000.00** registration fee which forms part of the school fees.
NB: This amount is **NON-REFUNDABLE.**
- Failure to do this will mean that your application **will not be considered.**
- If you have not been contacted by 09 June 2023, then it means your application was **not successful.**

Yours in Education,



MRS N. MANDIMO
PRINCIPAL