

ADMISSION APPLICATION

(To be returned to the Administration office)

Application Procedure:

- Complete this application form and submit it together with the following documents:
 - Copies of previous school reports,
 - Copy of proof of immunizations,
 - Certified copy of birth certificate or other proof of birth date,
 - Recommendation form from pastor,
 - Two recent passport-sized photographs.
- A test for grade placement and/or school readiness may be requested
- An interview with the principal and/or members of the Management Board will be arranged.
- You will be notified about the success of the application
- Successful applicants will be required to pay a registration fee which includes the cost of text books in order to secure the applicants position in the school. All fees must be paid before the student can attend any classes.

A. STUDENT DETAILS

1. Surname _____

2. First names in full _____

3. Date of application _____

4. Age at date of application _____

5. Date of Birth

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6. Gender Male ☐ Female ☐

7. Date entered S.A. Education: _____
(Immigrants only)

8. Does the applicant currently have a brother or sister in the school?

YES	NO
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9. Home Language

Afrikaans	English	IsiNdebele	SiSwati	IsiXhosa	Sesotho	SePedi	SeTswana	TshiVenda	XiTsonga	Zulu

10. Can the pupil understand and speak English?

YES	NO
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11. Ethnic Background

African	Colored	Indian/Asian	White	Other

B. SCHOOLING DETAILS

1. Present grade of applicant:

R	1	2	3	4	5	6	7
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(If applicable, please submit copies of all previous school reports)

2. Grade for which you are applying:

R	1	2	3	4	5	6	7
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3. Has the applicant repeated any grades?

YES	NO
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4. Reason: _____

5. Previous schools attended:

Name of School:	Province/Country:	Period:	Grades:

Phone Number of last school attended: _____

7. Has the applicant ever been expelled, suspended or refused admission to another school?

YES	NO
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If so, please specify. _____

8. Has the student ever been in trouble with the law, arrested, fined, etc.?

YES	NO
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If so, please specify. _____

9. Has the student ever had any disciplinary difficulties?

YES	NO
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10. Has the student ever used tobacco, alcohol, or drugs of any kind?

YES	NO
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C. MEDICAL DETAILS

1. Name and phone number of medical doctor where the student's medical history is known.

2. Has the student been immunised against all normal infectious and/or contagious diseases? *(Please submit proof)*

YES	NO
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3. Does the student suffer from any serious illness or have any particular medical problem?

YES	NO
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(Give details and a doctor's certificate where applicable) _____

4. State which childhood diseases the student has contracted: _____

5. List any allergies: _____

YES	NO
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6. Has the student ever had any occupational, speech, or remedial therapy?

Please specify: _____

(Please submit copies of reports)

YES	NO
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7. Have the student's eyes been tested before? _____

8. For use in case of emergencies, please submit your medical aid name and number, if applicable.

D. PARENT DETAILS (Legal Guardians or Parents)

1. Surname: Mother: _____ Father: _____
2. First Names: _____
3. Physical Address: _____
4. Postal Address: _____
5. Code: _____
6. E-mail Address: _____
7. Phone Numbers: (W) _____ (W) _____
(H) _____ (H) _____
(Cell) _____ (Cell) _____
8. Present Employ: Name of Employer: _____ Name of Employer: _____
Occupation: _____ Occupation: _____
9. Marital Status

Married	Divorced	Widowed	Separated	Never Married
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10. Name and phone number of nearest family or friend not at your address: _____
- _____
- _____

E. CHRISTIAN BELIEFS

1. Have you read and studied the Statement of Faith?

YES	NO
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2. Do you disagree with, or not believe any of the 10 statements?

YES	NO
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3. If yes, state which, and state alternative belief: _____
- _____
4. Do either you or your spouse profess to be a born-again Christian?

YES	NO
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5. If yes, describe how you became a Christian: _____
- _____
- _____
6. Are you or your spouse a member in good standing with a local church?

YES	NO
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7. If yes, state the church name: _____
- _____
8. Name and phone number of pastor: _____

F. PARENT UNDERTAKING:

I, the parent of _____ undertake to fulfill the following requirements:

1. School Fees:

I agree to pay the school fees by the first day of each month, for 11 months of the year (January – November).

I agree to pay a non-refundable registration fee which includes a textbook amount, per student, upon acceptance at the school.

I agree to the conditions of payment as set out in the Parent Student Handbook and the School Fees and Terms.

I agree to allow the school to use debt collectors to take action against me for failing to pay school fees.

I agree to give 30 days written notice of withdrawal of a student, failing which I understand that I will be responsible to pay one month's school fees.

2. Discipline:

I will make every effort to discipline my child at home and to support the teacher and Principal in their efforts to train and educate my child in the manner outlined in the Parent Student Handbook.

I will adhere to the school rules/Code of Conduct and teach my child to adhere to these rules.

3. Tuition of Students:

I agree to support the school and its staff in their task of teaching and training my child/ren, both academically and spiritually as set out in the Handbook and the Statement of Faith.

4. School Prospectus

I have read the School Prospectus and agree to support the school in its philosophies and applications as set out in this document.

G. PARENT INVOLVEMENT

We believe that the education of children is primarily the parent's God-given responsibility.

We as a school exist to assist parents in this task. We therefore encourage our parents to be involved in whatever way possible. With this in mind, please list any particular area in which you would like to be involved:

H. INDEMNITIES

The parent/legal guardian undertakes to:

1. Indemnify the school, its employees and officials, against any injury, harm, or other loss caused to any student of the school
2. Exempt the school, its employees and officials, from liabilities incurred on account of injuries to or illness of the student, and agrees and consents that the school or any of its teachers may consent to any operation or medical treatment of the student should such consent be required for medical reasons on an urgent basis, and should it not be possible for the parent of the student to be contacted immediately.
3. Exempt the school from any liability for loss or damage suffered due to the loss or damage of articles brought onto the school property.
4. Indemnify the school, its employees and officials, against any injury, harm or other loss caused to any student of the school whilst on school outings and trips, provided the school endeavors
5. to take adequate steps within its power to provide for the safety of the students.

I. SCHOOL UNDERTAKING

1. The school shall provide the students with tuition in accordance with the core curriculum and core syllabus, evaluating students according to their particular educational phase. It is intended that the prescribed curriculum will enable students to write a recognized Grade 12 examination in order to qualify for local tertiary institutions.

2. The school shall make every effort to fulfill its mission policy as stated here: "By God's grace and for His glory, Jabulane Christian Academy exists to guide students in the discovery of God's Truth."

I hereby certify that all the information given in this document is true and correct.

Signatures: Mother: _____

Father: _____

Person responsible for payment of the accounts: _____

Date: _____