



# STAR OF THE SEA CONVENT SCHOOL

## APPLICATION FORM

**The following documents are necessary when applying**

Unabridged Birth Certificate - Certified copy	
Baptism Certificate if Roman Catholic	
Both Parents' ID - Certified copy	
Clinic card	
Proof of residence – recent certified copy of rates, levy	
Most recent school report – Certified copy	
For Gr 1 applications – copy of Grade R account	
Study permit – for non South African citizens	
Annexure A (Method of payment)	
Post and Petties contribution (R50.00)	

**For official use only**

Admission Number	Admitted to Grade
NOTES	

The annual school fees are compulsory and are determined by the Governing Body and adopted by the parents at a meeting called for that purpose.

School fees are due and payable by the last day of February each year. (It is, however, policy to allow payment to be made termly or monthly in advance or by means of a monthly debit order.) Should payment not be made as above or by some other arrangement agreed to in writing by the School, the full amount outstanding becomes due and payable immediately.

In terms of family law, parents are jointly and severally liable for the payment of the school fees irrespective of their marital status, and irrespective of maintenance and court orders which may exist between the parties. In terms of section 39 of the South African Schools Act, both parents are liable to pay compulsory school fees. In terms of Section 40 and 41 of the South African Schools Act, the school may enforce the payment of these compulsory fees. Parents who are unable to pay school fees may apply for exemption of these fees. If parents fail to meet their school fee obligations the school may record the parent's non performance with a credit bureau. Any information conveyed to a credit information bureau will be available to other credit grantors and used in making credit risk management related decisions. The school thus follows this legal framework in handling credit and consumers.

I/We choose *domicilium citandi et executandi* for any correspondence or the service of any court processes at the residential address recorded on this application form and acknowledge liability for all attorney and own client costs, plus collection commission in the event of any outstanding accounts being handed over to the school's attorneys for collection.

1.Particulars of Learner (Please Print)		Grade Applied For		Starting Date	
Full Name and Surname of Learner					Male / Female
Date of Birth		Identity Number		Country of Birth	
Home language		Present School		Present Grade	
Denomination					Baptised (Y/N)

Principal: Alfonso Pereira

**2. Particulars of Parents / Legal Guardian / Sponsor**

	<b>PARENT 1</b>	<b>PARENT 2</b>
<b>Full Name and Surname</b>		
<b>Relationship to Learner</b>		
<b>ID Number</b>		
<b>Work Telephone Number</b>	( )	( )
<b>Home Telephone Number</b>	( )	( )
<b>Cell Number</b>		
<b>Fax Number</b>		
<b>Email Address</b>		
<b>Residential Address</b>		
	<b>Code:</b>	<b>Code:</b>
<b>Postal Address</b>		
	<b>Code:</b>	<b>Code:</b>
<b>Field of Occupation</b>		
<b>Name and Address of Employer</b>		
	<b>Code:</b>	<b>Code:</b>

**3. General Information** Tick appropriate blocks ✓

<b>Marital Status</b>								
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<b>Learner resides with</b>	<b>BOTH</b>		<b>Parent 1</b>		<b>Parent 2</b>		<b>Other</b>		<b>If other, a letter of consent from parent required</b>
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<b>Person responsible for direct supervision of learner (Other than Parents)</b>	<b>Name</b>		<b>Telephone Number</b>	
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<b>Number of children in the family</b>		<b>Is the learner the 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> etc. in the family</b>	
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<b>Name of Educational Institutions attended by siblings including grade</b>	

<b>Name and address of current school</b>	
<b>Tel:</b>	<b>Fax:</b>

<b>Date of leaving current school</b>	
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**4. Medical History of Learner** **Has your child been immunized against the following illnesses:**

<b>Tuberculosis (BCG)</b>		<b>Diphtheria</b>		<b>Whooping Cough</b>		<b>Tetanus</b>	
<b>German Measles</b>		<b>Measles</b>		<b>Poliomyelitis</b>		<b>Mumps</b>	

<b>Illnesses from which the learner is suffering or has suffered e.g. asthma, epilepsy</b>	
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<b>Operation/s learner has undergone</b>	
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**NB: All learners should be immunized against all the above illnesses before school attendance. Immunisation against poliomyelitis and tuberculosis (BCG) is legally compulsory. Written evidence of immunisation against poliomyelitis and tuberculosis (BCG could be demanded when the learner is admitted for the first time.**

<b>Has your child ever required supportive therapy? If yes, please supply brief details (e.g. Physiotherapy, Remedial etc.)</b>	
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<b>Please provide any other information that you feel would be relevant to this application</b>	
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**DECLARATION AGREEMENT:**  
 All the above information is, to the best of my knowledge, true and correct. On acceptance of my child as a pupil at Star of the Sea Covent, I undertake to abide by the rules of the school as detailed in the School Code of Conduct and undertake to meet my financial obligations to the school.

<b>Signature of Parent 1</b>	<b>Signature of Parent 2</b>	<b>DATE</b>
<b>Name</b>	<b>Name</b>	

**BACKGROUND INFORMATION ABOUT THE CHILD**