

**APPLICATION FOR ADMISSION TO SCHOOL****ENROLMENT FORM 2024****ED-U-COLLEGE (VAAL)**

31 HOFMEYER AVENUE, VEREENIGING, 1930

Tel: 016 455 1097



Note: This form must be completed in full. All changes to be initialed or signed by parent/ guardian. Completing the form does not necessarily mean that the learner has been accepted into the school

<b>Grade Applied for :</b>		<b>Highest Gr. Passed</b>		<b>Year Gr.Passed</b>		<b>Assession No</b>	
<b>Full Time Class:</b>		<b>Online Classes:</b>		<b>Online &amp; Fulltime Simultaneous:</b>			

Surname: \_\_\_\_\_ Initials \_\_\_\_\_ Nick Name: \_\_\_\_\_  
 First Names: \_\_\_\_\_ Other Names: \_\_\_\_\_  
 Date of Birth YYYY \_\_\_\_\_ MM \_\_\_\_\_ DDD \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_  
 Race: \_\_\_\_\_ ID or Passport No: \_\_\_\_\_  
 Country of residence: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
 If SA, Indicate Province of Residence: \_\_\_\_\_ Study Permit Number of non SA Citizen: \_\_\_\_\_

**Physical Address:** \_\_\_\_\_ Home Telephone No: \_\_\_\_\_  
 \_\_\_\_\_ Emergency No: \_\_\_\_\_  
 City/ Suburb: \_\_\_\_\_ Learner Cell: \_\_\_\_\_  
 Code: \_\_\_\_\_ Learner Email Address: \_\_\_\_\_

Home Language: \_\_\_\_\_ Language of Instruction: English HL & Afrikaans FAL  
 Mode of Transport \_\_\_\_\_ Taxi Driver Contact No: \_\_\_\_\_  
 Deceased Parents: Mother \_\_\_\_\_ Father \_\_\_\_\_ Both \_\_\_\_\_  
**For Gr 1 only: Indicate Pre-Primary Education :** None \_\_\_\_\_ Non Formal \_\_\_\_\_ Formal \_\_\_\_\_

**Previous School Information**

Name of Previous School: \_\_\_\_\_  
 Previous School address: \_\_\_\_\_  
 Code: \_\_\_\_\_ Province: \_\_\_\_\_ Country: \_\_\_\_\_

**Learner Medical Information**

Medical Aid Number: \_\_\_\_\_ Medical Aid Name: \_\_\_\_\_  
 Medical Aid Main Member: \_\_\_\_\_ Doctor Name: \_\_\_\_\_  
 Doctor's Address: \_\_\_\_\_ Doctors Tel No: \_\_\_\_\_

Medical Conditions:

Special Problems Requiring Counselling:

<b>Dexterity of Learner: Right Handed:</b>		<b>Left Handed:</b>		<b>Ambidextrous:</b>	
<b>Registered Social Grant: Yes</b>		<b>No</b>			
<b>Rec. Social Grant: Yes</b>		<b>No</b>			

If the Learner is accepted, the following documents must be submitted to the School

- |   |                              |   |
|---|------------------------------|---|
| 1. Copy of Immunisation Records         | 2. Copy of Birth Certificate | 3. Progress Report from Previous School |
| 4. Transfer letter from Previous School | 5. Registration Fee          | 6. Copy of Salary Advice                |
| 7. Study Permit                         | 8. Copy Of Parent ID         |   |

**APPLICATION FOR ADMISSION TO SCHOOL****Siblings**

Number of other children in this school:

Position in the Family (e.g. First): \_\_\_\_\_

Please Supply Full Names Below:

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

**Parent / Guardian Information**

Complete as SEPARATE parent form for each parent living at different Physical Address

Title: \_\_\_\_\_ Initial: \_\_\_\_\_ Surname: \_\_\_\_\_

First Name: \_\_\_\_\_ Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Home Language: \_\_\_\_\_ Race: \_\_\_\_\_

ID or Passport No: \_\_\_\_\_ Account Payer: Yes ☐ No ☐

Residential Street Address: \_\_\_\_\_

City / Suburb: \_\_\_\_\_ Code: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Surname of Spouse: \_\_\_\_\_ First Name: \_\_\_\_\_

Occupation of Spouse: \_\_\_\_\_ Learner Resides with this Parent/s: Yes ☐ No ☐

Spouse ID No: \_\_\_\_\_ Relation to Learner: \_\_\_\_\_

Marital Status of Parent: \_\_\_\_\_

**Correspondence Details**

Title: \_\_\_\_\_ Initial: \_\_\_\_\_ Surname: \_\_\_\_\_

Postal Address: \_\_\_\_\_

City / Suburb: \_\_\_\_\_

**Other Contact Details**

Home Tel No: \_\_\_\_\_ Work Tel No: \_\_\_\_\_

Fax No: \_\_\_\_\_ Cell No: \_\_\_\_\_

Spouse Work Tel No: \_\_\_\_\_ Spouse Cell No: \_\_\_\_\_

Email: \_\_\_\_\_ Spouse Email: \_\_\_\_\_

**I hereby declare that to the best of my knowledge , the above information supplied is accurate and correct****Name of Parent / Guardian (Please Print):** \_\_\_\_\_**Signature of Parent / Guardian:** \_\_\_\_\_**Date:** \_\_\_\_\_**For Office Use only**

1. Date: \_\_\_\_\_ 2. Accepted: \_\_\_\_\_ 3. Accession Number: \_\_\_\_\_

4. Rejected: \_\_\_\_\_ 5. Reason for Rejection: \_\_\_\_\_

6. Documentation Received

6a. Immunisation Record: \_\_\_\_\_ 6b. Birth Certificate: \_\_\_\_\_ 6c. Progress Report Prev School: \_\_\_\_\_

6d. Transfer Card Prev School: \_\_\_\_\_ 6e. Registration Fee: \_\_\_\_\_ 6f. Copy of Salary Advice: \_\_\_\_\_

6g. Parent paying fees - ID copy: \_\_\_\_\_ 6h. Study Permit: \_\_\_\_\_

# ACCOUNTABLE PERSON'S INFORMATION

☐

Parent 1

☐

Parent 2

☐

Other

Only if 'Other', please complete Section A or B below"

## A) INDIVIDUAL

Title: \_\_\_\_\_

Full Names: \_\_\_\_\_

Surname: \_\_\_\_\_

Initials: \_\_\_\_\_

Nick Name: \_\_\_\_\_

I. D. Number: \_\_\_\_\_

Home Language: ☐ Afrikaans ☐ English

☐ Other \_\_\_\_\_

Communication preferences ☐ SMS ☐ E-mail

☐ Mail ☐ By Hand

Language preferences: \_\_\_\_\_

Cell Phone number: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Residential Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

Postall Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

## B) COMPANY / CLOSED CORPORATION / TRUST

Title: \_\_\_\_\_

Name: \_\_\_\_\_

Registration Number: \_\_\_\_\_

Language Preference: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Business Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

Postal Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Postal Code: \_\_\_\_\_

**GENERAL INDEMNITY FORM**

I, the undersigned, \_\_\_\_\_ (Full names of Parent / Guardian)

ID No: \_\_\_\_\_ being the Parent / Legal Guardian of \_\_\_\_\_,

hereby enroll him / her and accept the stipulations of the indemnity below and undertake the following:-

- I authorise Ed-U-College to act in loco parentis in respect of the minor for the duration of him / her attending school and in the event of any unforeseen circumstances arising, until such a time as I may again take over responsibility for the minor.
- I authorise Ed-U-College, at its discretion that, in its opinion, a reasonable parent would have to take in relation to the safety and well being of the minor and accept personal liability for all expenses and costs arising out of such actions, including medical expenses and the cost of medicines.
- I indemnify Ed-U-College against any and all losses, damages and injury, including all consequential losses and damages to and in respect of any property of the minor or any other parties or in the possession of the minor or any other parties arising out of actions of Ed-U-College during and in any way related to the school including trips arranged by the school and accept full liability in the place and stead of Ed-U-College, for any and all such loss, damage and injury and consequential losses and damages.
- This Indemnity extends to all members and employees of Ed-U-College and all contractors employed by Ed-U-College in the same manner as that in which it extends to Ed-U-College.
- I give consent for my child to walk with an Educator to Ed-U-College's Sports Ground and utilise the Sports Ground and Facilities.
- I give consent for my child to be photographed at school, on outings and to use that photograph for Ed-U-College's website and marketing materials.

\_\_\_\_\_  
**PARENT / SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**LEARNER SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**WITNESS**

\_\_\_\_\_  
**DATE**

# FINANCIAL CONTRACT

I, the undersigned, \_\_\_\_\_ (Full names of Parent / Guardian),

ID No: \_\_\_\_\_ being the Parent / Legal Guardian of \_\_\_\_\_

in Gr. \_\_\_\_\_, hereby agree that :-

- I take **FULL** responsibility for the payment of my child's school fees on time.
- I shall pay **All fees by the 25<sup>th</sup> of each month.**
- In the event of breach of contract Ed-U-College (Vaal) could at its own discretion:
  1. Withhold tuition and / or
  2. Confiscate learning material and / or
  3. Withhold results and / or
  4. Hand over account to attorneys for collection of all outstanding fees after 21 days notification to parents and/or (referred to as de-registration)
  5. Cancel this contract after 21 days of notification to parents and add 2(two) month's school fees to the arrears amount – in lieu of notice (referred to as de-registration.)
  6. Removal from register.
  7. Not mark or evaluate work, tests and / or exams.
  8. Withhold transfer cards and / or indicate payment owed on the transfer card.
- I, the Parent / Guardian am required to give **two calendar month's notice in writing before withdrawing the pupil from the school.** (If I, the Parent, fail to give such notice, I shall nonetheless be liable for payment in full of all school fees plus two months notice period from the last day of attendance by the learner).
- I, the Parent / Guardian shall not be entitled to rebate of fees if my child is absent for any portion of a school term for whatever reason.
- I, the Parent / Guardian shall submit proof of income on enrolment or at any stage requested by the school. (Learners only be admitted and remain registered while parents' financial status is viable.)
- In the event that I, the Parent / Guardian send school fees or any money with my child, the school will not take responsibility for any loss or theft thereof.
- I, the Parent am aware that if my child is de-registered and I do not re-register my child within 30 days after de-registration, my child / children will not be able to continue their education at Ed-U-College.
- **The school reserves the right to:**
  1. Charge interest on overdue accounts and / or charge an administration costs for fees in arrears.
  2. Without notice to vary these conditions, including fees and other extras, from time to time, in its entire discretion, but failure by the school to enforce any condition shall not constitute a waiver of its rights.
  3. Allocate any funds paid toward other school activities such as outings, trips, and fundraising, including LSM, toward school fees at any time if school fees are in arrears. LSM fees are due on or before the 25th of every month – money paid toward school fees will be allocated to cover the monthly LSM fee outstanding.
  4. In the event of learners leaving the school and siblings remaining, any fees received will be allocated towards the notice period of the learners left until fully paid up.
- The school is entitled to instruct its attorneys to attend to the collection of any overdue accounts, and the parent is liable for payment of all costs so incurred, on the scale as between the attorney and client, including collection commission, whether legal proceedings are instituted by the school's attorneys or not.
- **Enrolment at Ed-U-College is only confirmed on receipt of all valid documentation required on this form e.g. Transfer card from previous school, Report from previous school, both with the original school stamp. ( No copies will be accepted.) Written proof of paid up account at previous school. **Valid Passport and Study Permit for Non-South African Learners.****
- If any fees for the previous year is outstanding such a learner will not be allowed to enroll for the following year.
- If a learner leaves the school through the year and any fees are outstanding, the learner will not be allowed to re-enroll without full settlement and registration fees paid.
- If a learner is outstanding any fees on 31 December, registration fees will be payable to enroll for the following year.
- **NO registration fee will be refunded.**
- **ALL school fees are payable for 11(eleven) months – January up to and including November**
- **Should my child return at the beginning of a new year, the previous year's financial contract remains valid until such time as the responsible person has signed the compulsory financial contract of the new year – therefore all clauses remain in effect.**
- **Should my child not return forms for the following year by deadline date a re-registration fee will be charged and my child will placed on a waiting list.**
- **Should my child not return to school in January the registration fee will be charged on return.**

I HAVE READ, UNDERSTOOD AND UNDERTAKE TO ADHERE TO THE REGULATIONS ABOVE

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
WITNESS

\_\_\_\_\_  
DATE

## Consent form in terms of the Protection of Personal Information Act 4 of 2013 (POPI)

### Consent to use personal information

- By agreeing to the terms of this information form, you, \_\_\_\_\_ (Name & Surname), hereby voluntarily authorise **Ed-U-College (Vaal)** to process your personal information as well as that of the learner \_\_\_\_\_ (including the names, physical address, telephone numbers and any other information you have provided to the school).
- Processing shall include the receipt, recording, organising, collation, storage, updating or modification, retrieval, alteration, consultation and use; the dissemination by means of transmission, distribution or making available in any other form, or the merging, linking as well as blocking, degradation, erasure or destruction of information.
- This consent is effective immediately and will remain effective until one of the conditions stated under paragraph 8 of the Policy on the Protection of Personal Information has been met (available on request).
- The personal information may only be processed if it is adequate, relevant and not excessive, given the purpose for which it is processed, and if processing occurs in accordance with the relevant provisions of POPI. The purpose of the processing of information must relate to a function or an activity of the school.
- In addition, you hereby take note that Ed-U-College (Vaal) collects and processes personal information pertaining to the proper functioning, management and governance of the school, as prescribed in the South African Schools Act 84 of 1996 and other relevant education legislation and policies.
- The type of information will depend on the purpose for which it is collected, and will be processed for that purpose only.
- In terms of section 11 of POPI, personal information may only be processed in the following circumstances:
  - If the data subject, or a competent person where the data subject is a child, consents to the processing.
  - If processing is necessary to carry out actions for the conclusion or performance of a contract to which the data subject is party.
  - If processing complies with an obligation imposed by law on the school.
  - If processing protects a legitimate interest of the data subject.
  - If processing is necessary for the performance of a public law duty.
  - If processing is necessary for pursuing the legitimate interests of the school.

### Your rights in terms of this consent

You have the following rights:

- The right to know what information is being kept, how it is being used, and when the school will disclose it.* All of the aforesaid information is contained in our Policy on the Protection of Personal Information and our Privacy Policy, which are available and may be obtained from our offices or our website.
- The right to correct your details.* The school will try to keep your information up to date. However, should any of your details change, please notify us to ensure that our records are as accurate as possible.
- The right to revoke consent.* You may revoke the consent you have given us in terms of this form at any time. Your revocation should be in writing and addressed to the information officer of the school. Revoked consent is not retroactive and will not affect any past or existing use of your information.

### Consent to receive marketing information

By agreeing to the terms of this consent form, you expressly consent to the processing of your information for marketing purposes, and understand that by consenting, you may receive marketing materials in the form of SMSs, e-mails and the like from the school.

Please tick the appropriate box below:

I agree ☐ I do not agree ☐

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE

DIRECTORS: F STRUWIG & C KLEYNJAN



## **RELEASE FORM IN RESPECT OF LEARNER PHOTOS/IMAGES/VIDEOS**

Hereby, I, (please neatly print full name) \_\_\_\_\_, grant permission to Ed-U-College (Vaal) to display photos/images/videos of the child(ren) indicated below as part of:

- a demonstration/project/activity in the course of classroom teaching;
- a sample project/activity on CD created by the school for use in educational workshops, classrooms, advertisements, etc.;
- the school's webpages and social media platforms (including Facebook and Twitter);
- samples given to programme publishers, or contest entries submitted to sponsors;
- video recordings to appear in a school-related programme broadcast on a television station; and/or
- any printed publication, including, though not limited to, newspapers, magazines, yearbooks, etc.

In granting this permission, I understand that the school may use photos/images/videos of the child(ren) for purposes such as celebrating achievements and publicising education events, as deemed appropriate by the school governing body and the principal, and that such use may include display in the school photo gallery.

I further understand that although the school associated with the photos/images/videos will be identified, and adults appearing in photos/images/videos may be named, the personally identifiable information of the child (ren), except for the name (s) of the child (ren), will not be used with any photo/image/video.

I am signing this release form in the knowledge that any photos/images/videos posted on the school's website can be downloaded and reproduced by various news organisations, including print, electronic and broadcast media, and I therefore release the school from any liability arising from the use of photos/images/videos of the child(ren) in school web postings.

Additionally, I understand that there are potential dangers associated with the posting of photos images and videos on a website, since global access to the internet does not allow for control over who accesses information.

I further understand that if I wish to rescind this agreement, I may do so at any time by sending a letter to the Principal of the school.

Name(s) of learner(s): \_\_\_\_\_

Name of parent/guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal code: \_\_\_\_\_

Telephone number: \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN:\* \_\_\_\_\_ Date: \_\_\_\_\_

\*Learners 18 years of age or older may sign this release form themselves.