



# LILYFONTEIN SCHOOL

## INDICATION OF INTEREST FOR ENROLMENT

YEAR  GRADE  BOYS HOSTEL REQUIRED? (MON – FRI)

Please email all documents to: [admissions@lilyfontein.co.za](mailto:admissions@lilyfontein.co.za)  
Incomplete applications will not be processed. Please write (print) clearly.

**Kindly Note:** School tours are limited and by appointment only. Do you require a school tour?  YES  NO

PUPIL'S DETAILS							
Surname:				First Name(s):			
Date of Birth:				Male/Female:			
Present School:				Present School Tel No.:			
Suburb / Town:							
MOTHER'S DETAILS							
Surname:				First Name(s):			
Email:				Home Language:			
Contact / Cell:				Occupation:			
Alternative Contact / Cell:				Place of Employment:			
Home Address:							
FATHER'S DETAILS							
Surname:				First Name(s):			
Email:				Home Language:			
Contact / Cell:				Occupation:			
Alternative Contact / Cell:				Place of Employment:			
Home Address:							
LIVING ARRANGEMENTS AND SIBLINGS							
Who does the child live with:	MOTHER	FATHER	BOTH	OTHER / GUARDIAN	Younger siblings:	YES	NO
Existing siblings at Lilyfontein:			YES	NO	Applied for siblings at Lilyfontein:	YES	NO
Other Comments / Motivation:							

### PLEASE ATTACH CERTIFIED COPIES OF THE FOLLOWING DOCUMENTS:

- |  |   |
|--|---|
| <input type="checkbox"/> Pupil's current and last two years school reports | <input type="checkbox"/> Current and last two years statement of school fees    |
| <input type="checkbox"/> Child's unabridged birth certificate              | <input type="checkbox"/> Proof of residential address (not older than 3 months) |
| <input type="checkbox"/> Child's clinic card / immunization record         | <input type="checkbox"/> Confidential Report (Emailed from previous school)     |

### THANK YOU FOR YOUR INTEREST SHOWN

By signing this form, we hereby agree and consent, in accordance with the Protection of Personal Information Act 4 of 2013, to the processing of the personal information provided herewith. We understand that the school will take all reasonable and lawful steps that it considers appropriate to protect the privacy of the information provided herein.

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

\_\_\_\_\_  
DATE

**GRADE 2 - 12**

**APPLICANT'S INVOLVEMENT AND MOST RECENT ACHIEVEMENTS**

(Do not submit copies of certificates)

<b>SCHOOL HISTORY</b>		
<b>DATES</b>	<b>NAME OF SCHOOLS</b>	<b>REASON FOR LEAVING</b>
<b>ACADEMIC ACHIEVEMENTS AND AWARDS</b>		
<b>CULTURAL ACTIVITIES</b>		
<b>ACTIVITY</b>	<b>SPECIAL ACHIEVEMENT (IF ANY)</b>	
<b>SPORT PARTICIPATION</b>		
<b>SPORT</b>	<b>TEAM REPRESENTED (IF APPLICABLE)</b>	<b>SPECIAL ACHIEVEMENT (IF ANY)</b>
<b>ADVENTURE-BASED ACTIVITIES</b>		
Please tick if you are able to do, or have experience doing, any of the following activities:		
Can ride a bicycle	Have Abseiled	Have participated in an Adventure Sport
Have ridden a horse	Have done a multi-day hike	Can swim
Have paddled or canoed	Have gone camping	Any other
Events participated in (if any):		



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## CONFIDENTIAL REPORT

Please have this Confidential Report completed and stamped by your child's current school. The school must then email this completed report to [admissions@lilyfontein.co.za](mailto:admissions@lilyfontein.co.za) at their earliest convenience.

Learner: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Current School: \_\_\_\_\_

SECTION A – GENERAL INFORMATION				
	EXCELLENT	GOOD	SATISFACTORY	WEAK
Attitude towards school work				
Behaviour in the classroom				
Respect				
Self-Discipline				
Responsibility				
Social Adjustment				
Leadership Potential				
Parental co-operation				
SECTION B – COMMENT BY SCHOOL BURSAR				
Are the school fees paid up? If not, please comment:			YES	NO
Have there ever been problems with payment of school fees whilst at your school? If yes, please elaborate:			YES	NO
SECTION C – OTHER RELEVANT INFORMATION ON THE LEARNER				
Does the learner show any serious behavioural problems? If yes, please elaborate:			YES	NO
Does the learner have any special educational needs? If yes, please elaborate:			YES	NO
Would you recommend the learner as a future learner of Lilyfontein School?			YES	NO
SECTION D – TESTIMONIAL OR RELEVANT COMMENTS BY PRINCIPAL				
Specify Academic / Sporting / Cultural achievements, any serious behavioural problems, any special educational needs and a character reference:				

NAME OF CLASS TEACHER

NAME OF PRINCIPAL

SIGNATURE

SIGNATURE

DATE

DATE

SCHOOL STAMP
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