RIEBEECKSTAD HOËRSKOOL HIGH SCHOOL

2 057 388 1884

A 057 388 4882

£ 082 560 3247



E 86385 R EBEECKSTAD 9469

richics0@absamail.co.za www.richics.co.za

| APPLICATION FOR ADMISSION TO SCHOOL GRADE: Year | r: | | | | |
|---|----|--|--|--|--|
| Office use only: ADMISSION NUMBER: | | | | | |
| PARTICULARS OF PUPIL: | | | | | |
| Surname: | | | | | |
| Initials: | | | | | |
| Full names : | | | | | |
| Nick Name: | | | | | |
| Date of Birth : Year Month Day | | | | | |
| ID number: | | | | | |
| Gender : Male / Female | | | | | |
| Race : | | | | | |
| | | | | | |
| Citizenship: | | | | | |
| Home Language: | | | | | |

Note: Our school is a Quintile 5 school which <u>IMPLIES THAT LEARNERS WHO</u> <u>ATTEND THIS SCHOOL HAVE TO PAY THE REQUIRED SCHOOL FEES AS</u> <u>DETERMINED BY THE GOVERNING BODY</u>. No exemption of the required fees will be given if the learner chooses to attend this school and not a school which is a non-paying school closer to home. This form must be completed in full. All changes to be initialled or signed by parent/guardian. <u>Completing the form does not necessarily mean that the learner has been accepted into the school.</u>

PREVIOUS SCHOOL INFORMATION:

| Name of Previous School : | _ |
|---|--------------|
| Address of Previous School: | _ |
| Telephone of Previous School: | _ |
| | |
| SPORT INFORMATION OF LEARNER / CULTURE: | |
| | |
| | |
| | |
| | |
| | |
| | |
| MEDICAL INFORMATION: | |
| Medical Aid Number: | |
| Name of Medical Aid : | _ |
| Name of Medical Aid Member: | _ |
| Name of doctor: | - |
| Telephone number: | _ |
| Medical Condition: | - |
| | |
| May the pupil be immunised by a medical officer in the event of the o | utbreak of a |
| contagious disease? (Yes / No). | |
| SIBLINGS: | |
| Number of other children at this school: | |
| Position in the family (e.g. First): | |
| Please supply full names below: | |
| 1. Name and surname: Grad | e: |
| 2. Name and surname: Grad | e: |
| 3 Name and surname: Grade | . |

PARENT / GUARDIAN 1 (FATHER)

| Title : | | | | |
|---|--|--|--|--|
| Initials: | | | | |
| Surname: | | | | |
| Nick name: | | | | |
| Home Language: | | | | |
| Race : | | | | |
| ID Number: | | | | |
| Residential Street Address: | | | | |
| | | | | |
| | | | | |
| Occupation: | | | | |
| Employer: | | | | |
| Learner resides with parent/s : (Yes /No) | | | | |
| Relationship to Learner: | | | | |
| Marital status of parent: | | | | |
| Home Telephone: | | | | |
| Work Telephone: | | | | |
| Cell Number: | | | | |
| E-Mail address : | | | | |
| | | | | |

PARENT / GAURDIAN 2 (MOTHER)

| Title: | | | | |
|--|--|--|--|--|
| Initials: | | | | |
| Surname : | | | | |
| Nick name: | | | | |
| Home Language: | | | | |
| Race : | | | | |
| ID Number: | | | | |
| Residential Street Address: | | | | |
| | | | | |
| | | | | |
| Occupation: | | | | |
| Employer: | | | | |
| Learner resides with parent/s : (Yes / No) | | | | |
| Relationship to Learner: | | | | |
| Marital status of parent: | | | | |
| Home Telephone: | | | | |
| Work Telephone: | | | | |
| Cell Number: | | | | |
| E-Mail address : | | | | |
| | | | | |

The following documents must be submitted:

| 1. | Copy of parent's and learner's ID document / birth certificate |
|----|--|
| 2. | A transfer form (first day of the new term/or year) |
| 3. | A copy of the latest report |
| 4. | Documents as proof of guardianship |

- 5. Utility bill with residential account
- 6. Proof of income of both parents / or a letter from work
- 7. Annexure A and B
- 8. Pupil Particulars
- 9. SA Sams Form
- 10. Proof of disciplinary record

| Office use only: |
|---------------------------------|
| Documentation Received : Yes No |
| 1. Date : |
| 2. Accepted : |
| 3. Rejected : |
| 4. Reason for Rejection: |
| 5. Accession Number : |

Subject choice only for Grade 10

| <u>GRADE 10</u> | | | | | | | | |
|---------------------|---|-----------------------|-------------|-------------------|-------------------|------------|------|------------|
| THE CORE SUBJECTS: | | | | | | | | |
| | | | | | | | | |
| | B: Some of the subjects have their own workbooks and must be bought by the learner. | | | | | | | |
| 1. | Afrikaans Addisionele Taal | | | | | | | |
| 2. | English Home Language | | | | | | | |
| 3. | Mathematics Mathematical Literac | (OR) | | | | | | |
| | | | | | | | | |
| 4. | Life Orientation | | | | | | | |
| Choc | se ONF subjects from | EACH GROUP. Can ta | ake extra s | ubiects : | | | | |
| | _ | | | , | | | | |
| GRO | EP 1 GROUP: | | | | | | | |
| 1. | Accounting | Geography | Touri | sm | | | | |
| | | | | | | | | |
| 000 | ED A ADALID. | | | | | | | |
| GRU | EP 2 GROUP: | 1 | 1 | | | | - | |
| 2. | Life Science | Consumer Studies | Fo | onomics | Tour | | _ | s Graphics |
| - | Life Goldfide | | | 0110111100 | (If enough | Learners) | & D | esign |
| | | | | | <u>"</u> | | | |
| | EP 3 GROUP: | | | | | Ī | | |
| 3. | Physical Science | Business Studies | Computer | Applicatio | n Technology | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Subject choice or | nly for Grade 11 | | | | | | |
| | | | | | | | | |
| | JECTS GRADE 11 | | | | | | | |
| THE | CORE SUBJECTS | | | | | | | |
| ND. C | | Ab -! | | -A l l | hA h Ah a la a | _ | | |
| NB: 3 | some of the subjects n | ave their own workboo | ks and mu | st be boug | nt by the learner | • | | |
| 1. | Afrikaans Addisione | lo Tool | | | | | | |
| 2. | English Home Langu | | | | | | | |
| 3. | Mathematics | (OR) | | | | | | |
| | Mathematical Literac | | | | | | | |
| 4. | Life Orientation | • | | | | | | |
| T. LIIE OTIERIALION | | | | | | | | |
| Choc | ose ONE subjects from | EACH GROUP. Can ta | ake extra s | ubjects : | | | | |
| CDO | ED 4 OBOUR. | | | | | | | |
| | EP 1 GROUP: | 10 | -110 | I - | • | | | |
| 1. | Accounting | Geography Spee | ech and Dr | ama Io | urism | | | |
| | | | | | | | | |
| GROEP 2 GROUP: | | | | | | | | |
| 2. | Life Science | Consumer Studies | Econ | omics | Engineers Gra | nhics & De | sian | Tourism |
| = | | | | | | .p & DC | 9 | |
| | | | | | | | | |
| GROEP 3 GROUP: | | | | | | | | |
| 3. | Physical Science | Business Studie | Con | nputer App | lication Technol | ogy | | |
| | • | | | | | | | |

Subject choice only for Grade 12

| THE | SUBJECTS GRADE 12 | | | | | | | |
|--|---------------------------------------|-----------------------------|--------------|---------------|--------------|------------------|--|--|
| | THE CORE SUBJECTS | | | | | | | |
| | | | | | | | | |
| NB: Some of the subjects have their own workbooks and must be bought by the learner. | | | | | | | | |
| 1. | Afrikaans Addisionele Taal | | | | | | | |
| 2. | English Home Lang | uage | | | | | | |
| 3. | Mathematics | (OR) | | | | | | |
| | Mathematical Litera | асу | | | | | | |
| 4. | Life Orientation | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Choo | se ONE subjects from | n EACH GROUP. Can take | extra subjec | ets: | | | | |
| | | | | | | | | |
| 000 | GROEP 1 GROUP: | | | | | | | |
| | | T - | | | | | | |
| GROE 1. | EP 1 GROUP: Accounting | Geography | Tourism | Engineers Gra | aphics & | Speech and Drama | | |
| | | Geography | Tourism | Engineers Gra | aphics & | Speech and Drama | | |
| 1. | Accounting | Geography | Tourism | 1 - | aphics & | Speech and Drama | | |
| 1. | | Geography | Tourism | 1 - | | l | | |
| 1. | Accounting | Geography Consumer Studies | Tourism | Design | | Speech and Drama | | |
| 1. | Accounting EP 2 GROUP: | | | Design | | l | | |
| GROE | Accounting EP 2 GROUP: Life Science | | | Design | | l | | |
| GROE | Accounting EP 2 GROUP: | | | Design | | l | | |
| GROE | Accounting EP 2 GROUP: Life Science | | Economi | Design | Engineers Gr | l | | |
| 1. | Accounting | Geography | Tourism | 1 - | aphics & | Speech and Di | | |

| DECLARATION AND UNDERTAKING OF INTENT BY PARENT / GUARDIAN | | | | | |
|--|--|---|--|--|--|
| I, (full name and surname) legal | parent / guardian of) | | | | |
| (full name and surname and identified | ynumber of pupil) | | | | |
| give hereby permission that he/she | may participate in tours and trips necess | sary. | | | |
| | e precautions will be taken for the safety a payment of medical and/or hospital fees, e staff. | | | | |
| | parent/guardian to the principal of the sch essary. I believe he/she is physically able | | | | |
| I shall see to it that my s | on/daughter will abide by all school rules | and that he/she will accept all obligations. | | | |
| lawyer for collection, I a | accept the responsibility to pay all legal fe | | | | |
| I, as parent/guardian, a address or telephone no | | ol informed, at all times, of any changes to my | | | |
| I support the code of co | nduct and school rules of this school. | | | | |
| I have received the code | e of conduct and signed it. | | | | |
| | | | | | |
| SIGNATURE FATHER / GUARDIAN | I.D. NUMBER Father / Guardian | DATE | | | |
| SIGNATURE MOEDER / GUARDIAN | I.D. NUMBER Mother / Guardian | DATE | | | |