



BETHAL INDEPENDENT PRIMARY SCHOOL

EMIS : 800031112 NPO Nr: 124 -919 PBO 930 035 99 IT 3504/10

C/O van Tonder Ave & Festenstein Ave Bethal

Tel: 017 647 1126 Fax: 017 647 1498

PO Box 1187, Bethal, 2310

Email: admin@bethalprimary.co.za

STUDENT APPLICATION FORM

Apply for year:		Date of application:	
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Note: This form should be completed in full. All changes to be initialled or signed by a parent or guardian. Completing this form does NOT necessarily mean that the learner has been accepted for enrolment.

STUDENT INFORMATION

Grade applied for											
Surname											
Initials											
First Name											
Other Names											
Date of Birth	Year: _____	Month: _____	Day: _____								
Gender (Please Tick <input type="checkbox"/>)	Male: _____	Female: _____									
Race (Please Tick <input type="checkbox"/>)	African: _____	Coloured: _____	Indian: _____	White: _____							
Religion (Please Tick <input type="checkbox"/>)	Christian: _____	Muslim: _____	African Religion: _____	Jehovah: _____	Other (please specify): _____						
Identity Number											
Citizenship											
Home Language											
Country of Residence				Province (if RSA)							
Number of children in family	Total no children:		Position of child in family:		Fathers side:						
	Mothers side:										
Any deceased parents											
Number of children in this school (please provide full names and grades)											
Grades repeated (Please Tick <input type="checkbox"/>)	None	Gr R	Gr 1	Gr 2	Gr 3	Gr 4	Gr 5	Gr 6	Gr 7		
Physical Address	Line 1										
	Suburb										
	Town/City										
	Code										
Mode of Transport											
Does the child receive social grant	Yes / No		Social Grant Number:								

FAMILY INFORMATION					
Family Status (Please Tick√)		1. Both Parents (married)	2. Step Father	3. Step Mother	4. Widower
		5. Widow	6. Guardian(s)	7. Divorced , stay with father	8. Divorced, stay with mother
		9. Separated, stay with father	10. Separated, stay with mother	11. Other	12. Stay together not married
		13. 2 nd marriage	14. Single parent (never married)	15. Step Father/ own mother	16. Step mother/ own Father.
Parent 1: (Please Tick√)	Father	Guardian Relation	Parent 2: (Please Tick√)	Mother	Guardian Relation
Father's Title & Surname:			Mother's Title & Surname:		
Full Names:			Full Names:		
ID Number:			ID Number:		
Home Address:			Home Address:		
Occupation:			Occupation:		
Employer:			Employer:		
Address workplace:			Address workplace:		
Contact Information of the father			Contact Information of the mother		
Work telephone no:			Work telephone no:		
Home telephone no:			Home telephone no:		
Cell:			Cell:		
Email:			Email:		
Fax:			Fax:		

SCHOLASTIC INFORMATION/INFORMATION FROM PREVIOUS SCHOOL	
Has the student ever been expelled, dismissed, suspended or refused admission to another school? Yes / No	
If yes, explain:	
Has the student ever had disciplinary difficulty at school? Yes / No	
If yes, explain:	
Does the student have a juvenile arrest record? Yes / No	
If yes, explain:	
Has the student ever used tobacco or non-prescription drugs of any kind? Yes / No	
If yes, explain:	
Name of previous school:	
Grade the child was doing	
Previous School Address:	
Country:	
Province:	
Previous School telephone number:	

DOCUMENTS/PAYMENT NEEDED FOR ADMISSION

1. R300 Application fee
2. Copy of the birth certificate
3. Copy of ID documents of both parents (mother & father)
4. Original report from previous school

This application must be filled out completely before it can be processed. An interview with parent(s) and student(s) will be required with the school management & the child will need to write an evaluation test before being enrolled at the school. If the application was successful, this will be added to the enrolment form.

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SIGNATURE OF FATHER

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SIGNATURE OF MOTHER

.....
DATE

.....
DATE