

# BELLVILLE TECHNICAL HIGH SCHOOL

## APPLICATION FORM



Co Strand and College road, Labiance, Bellville 7530  
 Phone: +27 (0)21-948-6951; Fax: +27 (0)21-946-3752  
 email: info@htsbellville.co.za  
 www.htsbellville.co.za

<b>Name of Learner:</b>	
<b>Grade Applying for:</b>	
<b>Year Applying for:</b>	

Please  
attach  
photo  
here

**Application Information and Requirements:**

1. Please print in capitals and complete **ALL** sections, even if there is repetition. The supplying of false information will invalidate this application. Please supply a **physical address** as well as a **postal address** if applicable.
2. **The application must be accompanied by :**
  - 2.1 **Certified Copies** of Identity documents of **both** parents and/or account payers.
  - 2.2 **Certified** copy of the child's birth certificate or a **certified** copy of the first page of his/her ID book.
  - 2.3 **Certified** copy of the child's latest school report.
  - 2.4 One passport size photograph of your child, attached in the space provided.
  - 2.5 Behaviour report from current or previous school.
  - 2.6 Proof of residential address. (Municipal account / Lease).
  - 2.7 Foreign learners study permit. (If applicable)
3. **REGISTRATION FEE:** Should your application be successful, you will be required to indicate your intention to take up the place offered to your child by the payment of a registration fee that will be deducted from your first term's school fees. This fee is payable **by the date indicated** in our letter of acceptance to you. Late responses will only be reconsidered if there is still a vacancy.
4. By signing this application, you are binding yourself to all the rules, as attached, and as amended from time to time. You will be required to sign a separate computer usage contract on acceptance to the school.
5. In the case of a divorce, irrespective of the divorce agreement, **both parents** will be held responsible for the fees and must, therefore, **both sign** the application form.
6. If you have any objections to compulsory participation in sport, gym or any religious instruction, these must be made **in writing** and attached to this application for consideration.

**APPLICATIONS OPEN : FEBRUARY**  
**CLOSING DATE FOR APPLICATIONS : 11 MARCH 2016**

**OFFICIAL USE ONLY:**

RECEIVED ON:	D	D	M	M	Y	Y	Y	Y
Birth certificate or I.D.:	YES				NO			
Latest Report:	YES				NO			
Behaviour report	YES				NO			
Copies of Parents' I.D.:	YES				NO			
Proof of residence	YES				NO			

ACCEPTED	YES					NO				
By:										
Grade applied for:	8	9	10	11	12					
Admin No.										
Application Fees paid:	YES					NO				
Pastel No:										

**STUDENT REGISTRATION AND INFORMATION**

FIRST NAME																														
FULL NAMES																														
SURNAME																														
DATE OF BIRTH	D	D		M	M		Y	Y	Y	Y																		INITIALS:		

IDENTITY NUMBER												
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HOME LANGUAGE												
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REPORT LANGUAGE												
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GENDER	Male	Female
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ETHNIC GROUP	WHITE	COLOURED	BLACK	ASIAN
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IMMIGRANT	YES	NO	IMMIGRATION DATE	D	D		M	M		Y	Y	Y	Y
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COUNTRY OF ORIGIN												
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PREVIOUS SCHOOL																												
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SCHOOL NAME																												
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STUDENT EMAIL																												
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STUDENT CELLPHONE												
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POSITION IN FAMILY	1st	2nd	3rd	STUDENT AGE		
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RELIGIOUS PREFERENCE	YES	NO
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**LEARNER FAMILY INFORMATION**

1st PARENT TITLE																				
FULL NAMES																				
SURNAME																				

OCCUPATION																				
EMPLOYER																				

TELEPHONE WORK											
FAX											
TELEPHONE HOME											

CELL PHONE																				
E-MAIL																				

IDENTITY NUMBER																				
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SALARY PER MONTH										Before decuctions.
BONUS DATE										

MARITAL STATUS	MARRIED	DIVORCED	SINGLE PARENT
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REPORT	YES	NO	BILL	YES	NO	SMS	YES	NO
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HOME ADDRESS																				

ACCOUNT ADDRESS																				

**LEARNER FAMILY INFORMATION**

2 nd PARENT TITLE																				
FULL NAMES																				
SURNAME																				

OCCUPATION																				
EMPLOYER																				

TELEPHONE WORK											
FAX											
TELEPHONE HOME											

CELL PHONE																				
E-MAIL																				

IDENTITY NUMBER																				
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SALARY PER MONTH										Before decutions
BONUS DATE										

MARITAL STATUS	MARRIED	DIVORCED	SINGLE PARENT
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REPORT	YES	NO	BILL	YES	NO	SMS	YES	NO
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HOME ADDRESS																				
	POSTAL CODE																			

ACCOUNT ADDRESS																				
	POSTAL CODE																			

**MEDICAL INFORMATION**

ALLERGIES	ASTHMA	EPILEPSY	BEE STING	OTHER	
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	DIABETIC				
ATTENTION DEFICIT	SPELLING	WRITING	READING	ADHD	

AILMENTS																				
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HEARING IMPAIRED	VISUALLY IMPAIR	DISABLED
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DOCTORS NAME																				
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DOCTORS PHONE																				
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EMERGENCY CONTACT																				
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EMERGENCY NUMBER																				
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BLOOD GROUP																				
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HANDICAP																				
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MEDICAL AID NAME																				
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MEDICAL AID NUMBER																				
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MEDICATION																				
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DOSAGE																				
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COMMENT																				



**STATUTORY OBLIGATION TO PAY SCHOOL FEES**

1. I /We hereby apply to have the child whose name appears on this form as a learner at BELLVILLE TECHNICAL HIGH SCHOOL.  
 2. I /We hereby certify that I / we are the biological/ adoptive parents and that I/we have legal custody and / or legal guardianship in respect of the above named learner.

3. We take note and understand the following:

- a. Compulsory annual fees, as adopted by the majority of parents at a general meeting is available on request.
- b. School fees are payable in advance and are due on the first day of school.
- c. The payment options are as follows:.

	TICK
Fees can be paid in full	
Fees can be paid off in 10 monthly equal instalments	

- d. If parents are in arrears with one instalment then the full amount becomes due and payable immediately.
- e. Biological/adoptive parents are jointly and severally liable for the payment of the school fees irrespective of their marital status.
- f. In the event of non payment of school fees the school will institute legal action against both parents irrespective of maintenance and court orders which may exist between the parties.
- g. In terms of Section 39 of the South African Schools Act, parents are liable to pay compulsory school fees. This is a statutory obligation.
- h. In terms of Section 40 and 41 of the South African Schools Act, the school may enforce the payment of these compulsory fees.
- i. In the event of the school having to take legal action for the recovery of school fees, all legal costs, including attorney / client fees and collection costs incurred by the school will be charged to the parent's account.
- j. I/We have been informed that if we are unable to pay school fees I/we may apply for exemption of these fees.
- k. If Parents/s fail to meet their school fee obligations the school may record the Parent/s non payment with a bureau.

4. I/We undertake to give notice in writing of any intention to remove my/our child from the school and furthermore to return any books and/or equipment belonging to the school which our child may have.

5. The school may hold and process by computer or otherwise, any information obtained about parents as a result of their liability for payment of school fees.

6. The signatory hereto hereby chooses domicillium citandi et executandi as indicated below. In the event of a change of address, parents are to notify the school in writing.

ADDRESS:                      The signatory hereto hereby chooses domicillium citandi et executandi (official address) as:

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7. The above is valid from the day on which it is signed by the parent / guardian to the day on which the learner officially leaves the school.

**STATUTORY OBLIGATION TO PAY SCHOOL FEES**

**DECLARATION : PARENT 1**

I .....hereby declare that the information which I have recorded in this form is true and correct and by my signature below, I give the Chairman of the School Governing Body or his designate, permission to check and confirm any of the details or documents given by me. I understand that should any of the information supplied by me is found to be false, action may be taken against me .

Signed on this ..... day of ..... 20.....

.....

SIGNATURE

**DECLARATION : PARENT 2**

I .....hereby declare that the information which I have recorded in this form is true and correct and by my signature below, I give the Chairman of the School Governing Body or his designate, permission to check and confirm any of the details or documents given by me. I understand that should any of the information supplied by me is found to be false, action may be taken against me .

Signed on this ..... day of ..... 20.....

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SIGNATURE













