

Primary School

End of Kalahari Street
 Kuruman, 8460
 053 7120820
 info@sediba.org
 www.sediba.org



Dear Parent/Guardian,

When applying at Sediba Academy please take note of the following important aspects:

- All required documents must be attached before the application will be accepted.
- Please make sure to sign the applicable areas and include ID copies of all involved.
- Only Legal Guardians may make an application for admission - Attach proof
- Submit the completed application at the front desk.
- Completing and signing the Contract does not guarantee enrolment at Sediba Academy.
- The Admission Committee has the final say about the outcome of the application.
- The Contract activates after acceptance by both parties and payment of registration fee.
- The registration fee is payable within 7 days or you can forfeit the space.
- We will contact parents/guardians to confirm whether the application was successful or not.

REQUIRED DOCUMENTATION			
1. Copy of both parent's / Guardian ID's		8. Copy of child's Birth certificate / ID	
2. If a legal Guardian, proof of Guardianship		9. Provisional transfer letter from current or previous school	
3. Pay slip of Account payer		10. Statement of previous school fee account not older than 3 months	
4. Three-month bank statements-Account Payer		11. Two (2) ID size colour photos of the child	
5. Copy of proof of residence		12. Copy of child's latest school report	
6. Copy of medical aid card		13. For all non-S. A Learners. Valid study permit required	
7. Copy of clinic/immunisation card for applicants Gr R to Gr 3.		Staff member checked received.	

LEARNER'S FULL NAME AND SURNAME	For Grade	Academic year

We, the PARENT/GUARDIAN of the child above, undertake and bind ourselves contractually to Sediba Academy to pay school fees upfront, monthly and in full until we give 30 days' written notice for the child to leave. We will abide under the academic discipline, Christian values and school fee structure of Sediba Academy and will accept any changes that need to be made during unforeseen circumstances or yearly increases.

LEARNER INFORMATION

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

Grade Applied For:		Highest Grade Passed		Year Passed		Accession Number	
First Name to use in class:			Other Names			Gender M / F	
Date of Birth:	YYYY / DD / MM		Identification / Passport Number:				
Physical Address				Home Telephone:			
Suburb / Town				Emergency Number:			
Postal Code				Parent Cell			
Home Language			Mode of Transport				
Deceased Parent			Religion				
Previous School: Name / Phone Number							
Previous Principal: Name / Phone Number							
Dexterity of Learner	Right-handed		Left-handed				
Any Medical Conditions (i.e., Allergies / Asthma etc.) and / or Disabilities:							
Is or have your child received any therapy (like Occupational, Psychologist						Yes	No
If yes, give details the period and reason or add report.							
Childs Immunizations up to date: Yes No (If no, state the reason)							

PARENT / GUARDIAN INFORMATION

DETAILS OF MOTHER / GUARDIAN		DETAILS OF FATHER / GUARDIAN	
Title:		Title:	
Surname:		Surname:	
Full Name:		Full Name:	
Gender:	Race:	Gender:	Race:
Home Language:		Home Language:	
Identity No:		Identity No:	
Cell No:		Cell No:	
Email Address in block letters below:		Email Address in block letters below:	
Account Payer: Yes / No		Account Payer: Yes / No	
Residential Address:		Residential Address:	
Postal Address:		Postal Address:	
Occupation:		Occupation:	
Employer:		Employer:	
Employer Telephone no.		Employer Telephone no.	
Marriage Status of Parents:			
Learner Resides with:			
Contact Details where Learner Resides:			

FINANCIAL INFORMATION

Parent / Guardian responsible for paying the school fees:		
Name of Account Payer:	Contact no:	
ID Number:		
If paid by a trust or fund – provide details, contact person and number:		
Include a copy of the account payer's ID if not a parent/guardian		
Do you already have a school fee account with us?	Yes	No
If yes, please provide the school fee account no.		
Do you want to include this child in the mentioned account?	Yes	No

Mark the option you prefer:

Once off amount option: Qualifies for 5% discount on Debit order total if settled by March - the account must still be kept up to date on a monthly basis until full settlement takes place.	
Trust Fund/Master's Office option: (provide proof - compulsory) School fee payments remain the responsibility of the parent until the Trust settles the account. All claims must be handled by the parent/guardian. Account will be invoiced on the 12-month option	
12 Month Debit order option: Debit orders may start the month following registration. Last deduction should be 1 Dec. 12-Month invoices will be booked in future. The last instalment must be settled by 1 st of December each year.	
12 Month Cash option: First school fee payment may be on the month following registration and the last instalment paid by 1st December always in advance. 12-Monthly Invoices will be booked in future. Payments can be Cash / Swipe or Bank deposit.	

Any other information the school needs to know:

Full Names and Grades of other Siblings Currently attending Sediba Academy	



I/WE UNDERSTAND, AGREE TO AND UNDERTAKE AS FOLLOWS:

1. This application must still be approved before my/our child can be accepted at Sediba Academy.
2. I / We will make myself/ourselves aware and abide under all the financial and disciplinary policies of Sediba Academy at the time of my/our child's admission.
3. By signing the contract both of us take responsibility and are liable for paying school fees. I/we am/are aware that interest, extra charges and legal cost can be booked to my/our account if I/we fail in my/our commitment.
4. I / We also agree that this child may be financially expelled from class in the event of the account being in arrears for 60 days or longer and that invoices will still be added to the account until I/we give 30 days' notice that my/our child is leaving Sediba Academy.
5. I / We will give 30 day's written notice should my/our child have to leave the academy.
6. I / We am/are enrolling my/our child into a Christian school, as parent/s/guardian together with my/our child, we will both abide to the Christian ethos of the school.
7. I / We are aware that all sport or cultural activities my child participate in will be at our own expense
8. I/We understand that my/our child is expected to participate in school activities including physical education and sponsored trips away from the educational facility and I/we, the Parent/s hereby indemnify and agree to hold harmless, Sediba Academy, Executive Board, Principals and Staff, against any and all claims, costs or expenses, howsoever arising, including legal costs, arising out of injury, loss or damage suffered as a result of any activities during the enrolment of my child at the school.
9. Information as supplied is accurate and correct.

***If you are the legal guardian signing – please attach a copy of your legal appointment ***

Name of Mother /Guardian: _____

Signature: _____ **Date:** _____

Name of Father/Guardian: _____

Signature: _____ **Date:** _____

Surety (Needed for single parent/guardian)

Name of Surety: _____

ID no/Passport no of Surety: _____ **(Include copy)**

Physical Address of Surety: _____

Relationship to the learner: _____

Signature of Surety: _____ **Date:** _____