



**Full Names of Student (in BLOCK LETTERS)**

Surname
First names

**Starting Date**

2	0	Y	Y	M	M	D	D
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**Grade of Entry**

8	9	10	11	12
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AFFIX PHOTO OF STUDENT
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Application for  
**ADMISSION**

**The following must please accompany this application:**

1. Copy of birth certificate / ID / Passport of Student
2. Passport size photograph
3. Copy of the most recent academic report
4. ID copies of parent(s) / guardian(s)
5. Proof of residence of parent(s) / guardian(s)
6. In the case of foreign nationals, copy of study permit

**APPLICANT (Student) DETAILS** (as reflected on ID or Birth Certificate)

Surname:

First names:

Preferred call name:

Gender: Male  Female

Date of birth:  Y  Y  Y  Y  M  M  D  D

ID or Passport number:

Country of birth:

Nationality:

Cellular phone number:

Email address:

**PREVIOUS SCHOOL INFORMATION** (For all new applications)

Name of school:

Telephone number:

Date when left:  Y  Y  Y  Y  M  M  D  D

Reason for leaving:

Achievements:

Health:

Medication:

Disabilities:

**INFORMATION REQUIRED BY THE GAUTENG DEPARTMENT OF EDUCATION**

Learner is living with:  Father  Mother  Both  Guardian

Marital status of parents:  Married  Divorced  Single  Widow(er)

Race classification:  African  Coloured  Indian  White  Other

Religion:

Any deceased parents:  Father  Mother  Both

Dexterity of learner:  Left  Right  Ambidextrous

Home language:  Afrikaans  English  IsiNdebele  SiSwati  IsiXhosa  IsiZulu  
 SeSotho  SePedi  SeTswana  TshiVenda  XiTshonga  Other

Mode of transport to/from school:  Bicycle  Bus  By foot  Car  Motorcycle  Lift club  
 Taxi  Other

**FAMILY INFORMATION**

**FATHER / GUARDIAN**

(If guardian, state relationship with learner)

**MOTHER / GUARDIAN**

(If guardian, state relationship with learner)

Relationship to learner	<input type="text"/>	<input type="text"/>
Title	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>
First Names	<input type="text"/>	<input type="text"/>
ID/Passport Number	<input type="text"/>	<input type="text"/>
Occupation	<input type="text"/>	<input type="text"/>
Name of Employer	<input type="text"/>	<input type="text"/>
Business Telephone Number	<input type="text"/>	<input type="text"/>
Residential Street Address	<input type="text"/>	<input type="text"/>
Postal Address	<input type="text"/>	<input type="text"/>
Home Telephone Number	<input type="text"/>	<input type="text"/>
Cellular Number	<input type="text"/>	<input type="text"/>
E-mail Address	<input type="text"/>	<input type="text"/>
Emergency contact person	<input type="text" value="Name"/>	<input type="text" value="Number"/>

I / We the Parents / Guardians of

hereby apply for his / her admission to Jordao College.

I / We confirm that the information contained in this application is complete and accurate.

Should this application be successful:-

I / We acknowledge and accept that an Admission Fee as per school policy, will be required on completion of the "Rules and Conditions of Admission" to secure the place that is offered to the **Student** and which will be offset against the school fees for the **Student's** first year at **Jordao College**. This fee is non-refundable if the place is not taken up in January of the year for which the **Student** has been accepted.

I / We agree that **Jordao College's** acceptance of this application is conditional on my / our timeous completion of the "Rules and Conditions of Admission" documentation, including but not limited to the Code of Conduct, Indemnity Form(s) and Conditions of Admission.

Date

2	0	Y	Y	M	M	D	D
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Father's  
Signature \_\_\_\_\_

Date

2	0	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Mother's  
Signature \_\_\_\_\_

Date

2	0	Y	Y	M	M	D	D
---	---	---	---	---	---	---	---

Student's  
Signature \_\_\_\_\_

For **OFFICE** use only

**FINANCIAL**

Admission fee R \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / 20\_\_ Receipt No \_\_\_\_\_

Deposit R \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / 20\_\_ Receipt No \_\_\_\_\_

Notes \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Bursar's signature \_\_\_\_\_

**ADMINISTRATIVE**

Accepted  Not Accepted  Conditional Acceptance

Study Permit  Diplomatic Letter

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Headmistress' signature \_\_\_\_\_

**Received**

Copy of Student's ID / Birth Certificate

**Source**

Family / Sibling

**Marketing**

Street Pole Ads

Estate Agent

Copies of Parents' ID

Word of Mouth

Newspapers

Relocation

Copy of Academic Report

Advertising

Website

Have not seen

Local Area

Events / Exhibitions

Other

Grade \_\_\_\_\_

Register Class \_\_\_\_\_

Starting date \_\_\_\_ / \_\_\_\_ / 20\_\_

Teacher notified \_\_\_\_ / \_\_\_\_ / 20\_\_

Remarks \_\_\_\_\_  
\_\_\_\_\_

Administrator's signature \_\_\_\_\_

