

MUIZENBERG JUNIOR SCHOOL

MAIN RD, MUIZENBERG, 7945 CAPE TOWN

TEL: 021 788 4118 FAX 021 788 1282

E-MAIL: office@muizenbergjunior.co.za

<http://www.muizenbergjunior.co.za>



Principal: Mr. V. Erfort

APPLICATION FOR ADMISSION FOR 2021

Surname of Learner				Please Attach Photo Here
First name of Learner				
Grade applying for		Year applying for		

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. ***Please remember to complete your application online at wcedonline.westerncape.gov.za***

The application must be accompanied by:

- (a) Copies of Identity documents (*certified*) of both parents and/or account payers
- (b) Proof of residential address of the child & the parents, not older than 3 months (i.e., rates account or utility bill)
- (c) Copy of child’s unabridged birth certificate (*certified*)
- (d) Immunisation (Clinic) Card copy (*certified*) – all children must be immunised
- (e) Copy of child’s latest school report
- (f) One passport size photograph of your child attached in the space provided.
- (g) **A motivational letter stating why you would like your child to attend Muisenberg Junior School and why your child will be an asset to this school.**

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 Code of Conduct on acceptance to the school.

If you have any objections to compulsory participation in sport, gym or swimming; this must be done **in writing** and attached to this application for consideration.

APPLICATION MUST BE MADE TO A MINIMUM OF THREE SCHOOLS AS PER THE WESTERN CAPE EDUCATION DEPARTMENT’S DIRECTIVE.

APPLICATIONS OPEN: 17 February 2020

CLOSING DATE FOR APPLICATIONS: 17 March 2020

PLEASE NOTE: Only fully completed application forms with all required documentation will be accepted.

FOR OFFICE USE ONLY:		ACCEPTED:	YES	NO
FORM RETURNED ON:		BY:		
NECESSARY DOCUMENTS:		GRADE APPLIED FOR:		
Report & Birth Cert:		Date Responded to		
Copies of Parents’ I.D.:		Mode (email, phone)		

Submission of this application form does not indicate automatic admission to the school.

DETAILS OF LEARNER:					
SURNAME:				Initials:	
First names:					
Called name, if different to first name above:					
Gender:		Male:		Female:	
ADDRESS AND CONTACT DETAILS OF LEARNER:					
Physical address:			Postal code:		
Cellphone no:					
OTHER PERSONAL DETAILS OF LEARNER:					
Identity or Passport number:		Birth date:			
Home language:		Nationality:			
Date of arrival in SA:		SA Citizenship:		Yes No	
Are you relocating from another province/country		Religion:			
Highest grade passed:					
Learning difficulties for which therapy was received:					
Name of current school:			Tel No:		
Siblings (brothers/sisters) in this school (MJS)		Name:		Grade: House:	
		Name:		Grade: House:	
Is this the 1 st time that you are registering at a WCED school		Yes		No	
Siblings (brothers/sisters) in other schools					
Name:		School:		Grade:	
Name:		School:		Grade:	
Name:		School:		Grade:	
Name:		School:		Grade:	
Number of children in the family and is this child:					
First	Second	Third	Fourth	Fifth	
MEDICAL DETAILS OF LEARNER					
Doctor's Name					
Practice Phone no:					
EMERGENCY CONTACT (other than parents):					
Name:		Tel No:			
Relationship to learner:		Cell no:			

MEDICAL HISTORY OF LEARNER	
Birth Details:(Pregnancy complications; Premature etc)	
Allergies:	
Routine Medication:	
Recent Injuries:	
Previous Operations:	
Existing Medical Problems:	
Please indicate any appropriate information below. Failure to do so may result in your application being withdrawn:	
Learning disabilities:	
Social disabilities:	
MEDICAL AID DETAILS	
Member's Name:	Medical Aid: e.g. Fedhealth
Membership no:	Specific Plan: e.g. Maxima

CORRESPONDENCE			
Please indicate who is to receive the correspondence from the school. (i.e. sms, D6 communicator and Karri app and all other correspondence)	Father	Mother	Guardian
Please indicate who is to receive the school fees account.	Father	Mother	Guardian

WHO DOES THE LEARNER RESIDE WITH?					
Father	Mother	Guardian	Grandparent	Sponsor	Other

DETAILS OF PARENT 1					
Relationship to Learner:					
Surname				Title:	
First Names:			Gender:		
Nationality:			Date of Birth:		
Identity/Passport no:			e-mail:		
Marital status:	Married:		Divorced:		
	Single parent:		Re-married:		
Home phone no:			Cell no:		
Business number:			Fax no:		
Physical address:				Postal code:	
Physical Address Work					
Name of Company (Employer)	<i>(If parent is a teacher, please state the name of the school)</i>				
Occupation:					

DETAILS OF PARENT 2

Relationship to Learner:				
Surname:		Title:		
First Names:		Gender:		
Nationality:		Date of Birth:		
Identity/Passport No: no:		e-mail:		
Marital status:	Married:		Divorced:	
	Single parent:		Re-married:	
Home phone no:		Cell no:		
Business number:		Fax no:		
Physical address:			Postal code:	
Physical address: WORK				
Name of Company (Employer)	<i>(If parent is a teacher, please state the name of the school)</i>			
Occupation:				

HOW MARRIED?

Ante-Nuptial Contract	Community of Property	Customary	Hindu/Moslem	Other
-----------------------	-----------------------	-----------	--------------	-------

DETAILS OF GUARDIAN/SPONSOR

Relationship to Learner:				
Surname:		Title:		
First Names:		Gender:		
Nationality:		Date of Birth:		
Identity/Passport No:		e-mail:		
Marital status:	Married:		Divorced:	
	Single parent:		Re-married:	
Home phone no:		Cell no:		
Business number:		Fax no:		
Physical address:			Postal code:	
Physical Address: Work				
Name of Company (Employer)				
Occupation:				

If your child is a foreign national, you will be required to obtain a study permit from the South African Department of Home Affairs.

Unless you at any time instruct the School expressly and in writing to the contrary, your consent is given for the School to:

collect, store and process information about you and any Third Party or divorced or separated Parent responsible for payment of any or all amounts owing in school fees

collect, store and process names, contact details and information relating to yourself and your child and to allow such information to be made available to staff or responsible persons engaged or authorised by the school for school-related purposes.

include photographs, with or without name, of your Child in School publications, or in press releases to celebrate the School's or your Child's activities, achievements or successes;

supply information and a reference in respect of your Child to any educational institution which you propose your Child may attend. We will take care to ensure that all information that is supplied relating to your Child is accurate and any opinion given on his/her ability, aptitude and character is fair. However, the School cannot be liable for any loss you or your Child is alleged to have suffered resulting from opinions reasonably given, or correct statements of fact contained, in any reference or report given by us; and

The School may not distribute or otherwise publish any of your personal information in its possession, unless you give your consent, in writing, to the School that it may do so. Should this be the case, the School may only distribute or otherwise publish the information specified in your consent to the people and for the purpose stated in your written consent.

UNDERTAKING BY PARENTS

1. We hereby apply to have the child whose name appears on this form as a learner at **MUIZENBERG JUNIOR SCHOOL** and confirm that he / she complies with the basic criteria.
2. I /We hereby certify that I / we have legal custody and / or guardianship in respect of the above named learner.
3. I/We undertake to adhere to the school rules and disciplinary code and to the various alterations in the rules and disciplinary code that may be made from time to time.
4. I/We understand and confirm that the Principal or any person duly authorised, will act in *loco parentis* in any matter and at any time during which I /we have entrusted our child to the care of the school.
5. I/We understand that while every reasonable effort will be made to prevent losses or damage to learner's clothing and equipment, the school cannot be held liable for such.
6. I/We undertake to reimburse the school for any damage to school property that may be caused by our child.
7. I/We jointly and severally undertake to pay school fees and we/I understand the following:
 - a. The current school fees is a compulsory sum of **Gr R: R22890.00; Gr 1 – 7: R15530.00** per annum. The school fees for 2021 will be decided at a Budget Meeting in October 2020. The school fees for 2020 is adopted by the majority of parents at the annual Budget Meeting held in October.
 - b. The school fee is payable in full on 1 January each year
 - c. The fee may be paid off in 10 monthly instalments by debit order, EFT, direct bank deposit or cash to the Bursar's office.
 - d. The fees are due and payable at the beginning of each month with effect from 1 February to 1 November.
 - e. In terms of Section 40 of the South African Schools Act, the parties to this form are liable to pay compulsory school Fees.
 - f. In terms of Section 41 of the South African Schools Act, the school may enforce the payment of these compulsory fees.
 - g. The parties to this application undertake to pay all legal costs, including attorney / client fees and collection costs incurred by the school in the event of the school having to take legal action for the recovery of school fees.
 - h. Parents who are unable to pay school fees may apply for exemption from these fees – this only applies to Learners from Grade 1 to 7 (**There is no Exemption of fees granted in Grade R**)

8. I/We undertake to give **one term's 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.

9. I/We understand that the school reserves the right to verify all information supplied to them via this application. In the event of fraudulent documents submitted, the school reserves the right to lay a criminal charge of fraud against any of the parties to this application.

10. I/We undertake to notify the school in writing of any changes to our personal particulars or contact details.

11. I/We accept the responsibility of the pupil's transport to and from the school.

12. I/We acknowledge that no care is provided by the school for children before 07:30 am and also undertake to collect my child within 15 minutes of the close of school each day or make arrangements with the school.

13. I/We undertake to inform the school of our child's / children's absence from school. Parents / guardians declare that they are prepared to produce a doctor's certificate if and when required;

14. I/We undertake to support the school's constitution and policy of admission, as defined and implemented by the Governing Body of the school.

15. I/We understand that smoking in school uniform and the abuse of any drug or alcoholic beverage is an infringement of the critical school rules and will not under any circumstances be tolerated.

16. This commitment in its entirety will be valid from the day on which it is signed by the parent / guardian to the day on which the pupil officially leaves the school. **The Governing Body reserves the right to reconsider the admittance of pupils to the school.**

The parent / guardian declares that he / she is the legal guardian of the child and is entitled to sign this document, and shall be bound hereto both as parent / guardian, and in his / her personal capacity.

DECLARATION: PARENT 1 / GUARDIAN / SPONSOR

Ihereby declare that the information which I have recorded in this form is true and correct and by my signature below, I give the Chairperson 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 / GUARDIAN / SPONSOR

Ihereby declare that the information which I have recorded in this form is true and correct and by my signature below, I give the Chairperson 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