



APPLICATION FORM

[PLEASE ENSURE THE PAGES ARE COMPLETE BEFORE SUBMITTING]

LEARNER INFORMATION												
Surname				Gender								
Name/s												
Identity number					Date of birth							
Residential address												
Current school and grade												
Application for grade												
Family structure:		Married		Separated		Divorced		Single		Widowed		Living together
Applicant is number			out of			children						
Are any siblings enrolled at Gracehill College?												
Name current Sport / Culture involvement:												
Has your child any learning difficulties/ disabilities? <i>Please state them.</i>												
Should any learning difficulties be identified by our school, would you agree to your child being referred to an educational psychologist at our request?								Enter parent's Id as consent.				
Has your child repeated any grade?				State the grade								
Religion												
Name of Church:												
PARENT (1) (Please indicate)		FATHER			STEP PARENT			GUARDIAN				
Surname												
Name/s												
Identity Number					Date of birth							
Residential address												
Postal address												
Occupation												
Name of employer												
Address												
Contact numbers		H		W		Cell						
		email										
Religion												
Name of Church												
Citizenship		RSA		Other								
Signature												
PARENT (2) (Please indicate)		MOTHER			STEP PARENT			GUARDIAN				
Surname												
Name/s												

Identity Number		Date of birth	
Residential address			
Postal address			
Occupation			
Name of employer			
Address			
Contact numbers	H	W	Cell
	email		
Religion			
Name of Church			
Citizenship	RSA	Other	
Please note that it is compulsory for every student to attend assembly every Monday, as well as Bible Education periods and discipleship. *I agree that assembly, Bible Education and discipleship will be compulsory for every child and that they will be taught according to our charismatic evangelical ethos.			
Signature			
EMERGENCY CONTACT			
Name			
Relationship to learner			
Contact numbers	H	W	Cell
MEDICAL DETAILS			
Medical Fund		Fund No.	
Principal Member			
Family Doctor		Tel. No.	
Illnesses / allergies			
FINANCIAL DETAILS			
Bank			
Branch name			
Branch code			
Account Number			
Person responsible for school fees	Mr / Mrs		
	ID number		
ACADEMIC RECORD OF THE LEARNER			
Excellent		Good	
		Average	Failed
Has the learner ever been asked to leave a school?			
If yes, please supply details			
How did you hear about Gracehill College?			
Your reasons for selecting Gracehill College:			
1.			
2.			
3.			

Right of Admission Reserved

AGREEMENT - *Please read this clause before signing*

1. I/We, the parents, have read the school information and materials furnished and agree to our child submitting to the academic programme, disciplinary regulations and all other requirements for his/her education and development instituted by the administration and carried out by the Principal and staff at Gracehill College.

2. I/We, the parents, agree with the Statement of Faith and agree to allow our child to be instructed in it. We will ensure that our child abides by the principles upheld in the Statement of Faith at all times.
3. I, the learner, will abide by the Pupil's Code of Conduct and the School Rules and Dress Code Policies

DECLARATION

We declare that the contents of the Application Form are true and accurate and accept the School Rules.

Please enter your ID/Passport number if you cannot create a digital signature. This will serve as binding consent.

Signature
Father / Guardian

ID/Passport number

Signature
Mother / Guardian

ID/Passport number

Date