

BERLIN HIGH SCHOOL

Immigrant Road Berlin 5660 Tel: 043-6852313 Fax: 043-6852586

Email: bpschool@mweb.co.za

DATE RECEIVED	FOR OFFICE USE) ·	
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APPLICATION FORM

CLOSING DATE: 31 JULY 2019

The following must accompany your application form:

- 1. Proof of residence of biological parents/legal guardian (eg. Utilities Bill)
- Certified copy of both parents'/legal guardians' Identity Documents
- If one(or both) biological parent(s) is deceased, certified copies of death certificate(s) to be submitted.
- 4. Certified copy of your child's Birth Certificate
- 5. Copy of your child's latest School Report
- 6. Transfer certificate from previous school once the learner has been accepted

IF CHILD IS NOT A SOUTH AFRICAN CITIZEN, ALSO SUBMIT

- 1. Study Permit
- 2. A temp/permanent residence permit from the Department of Home Affairs
- 3. Proof applied for permission to stay in SA

	Surname		G	rade applying f	or		
	Full name/s					•	
	Date of birth						
	Identity number						
NILS	Gender						
)ET/	Physical home address						
I ST	Home language						
ICA.	Present school			Present grad	e		
APPLICANTS DETAILS	Reason for leaving present school						
	Other schools attended						
	Name and grade of siblings at Berlin School						
	Applicant living with	Mother	Father		Both parent	:S	
		Grandparent	Step parents		Other		

FIRST ADDITIONAL LANGUAGE (Gr 8, 9 learners)

Indicate in which of the following languages your child is educated in as a First Additional Language in the present ye	ar
(This choice is not allowed to be different from the First Additional Language at present)	

XHOSA	AFRIKAANS	
ALIOSA	AFRIKAANS	

	Title	Mr		Adv		Dr		Prof		Other	
	Surname										
	Full name/s										
	Identity number										_
	Physical home										
	address Occupation										_
	·										
	Name of employer										
	Employer's physical address										
	Employee's number/Persal nr										
	Salary per annum										_
	Contact details	Home			Work		Cell				_
	Marital status	Single		Married		Divorced		Re-		Widowed	T
	Relation to learner	Biological		Grandparent		Step parent		married Court app			_
		parent Other						guardian	al docu	ıment proving	_
		(Specify)						guardianshi	o must	be submitted	ť
*	IF SELF-EMPLOYE	D, PLEASE S	SUPPI	LY THE COMP	ANY RE	GISTRATION A	ND VAT I	DOCUMENT	S		
	Title	Mr		Adv		Dr		Prof		Other	Ī
	Surname			1	l.		'			•	_
	Full name/s										
	Full name/s Identity number										_
	Identity number Physical home										_
	Identity number Physical home address										
	Identity number Physical home address Occupation										
	Identity number Physical home address Occupation Name of employer										
	Identity number Physical home address Occupation Name of employer Employer's										
	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's										
	Identity number Physical home address Occupation Name of employer Employer's physical address										
	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr	Home			Work		Cell				
	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr Salary per annum Contact details	Home		Married	Work	Divorced	Cell	Re-		Widowed	
	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr Salary per annum Contact details Marital status	Single			Work		Cell	married		Widowed	_ _ _ _ _
	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr Salary per annum Contact details	Single Biological parent		Married Grandparent	Work	Divorced Step parent	Cell	married Court app guardian			
	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr Salary per annum Contact details Marital status	Single Biological			Work		Cell	married Court app guardian Copy of lega	al docu	Widowed ument proving	
·T I	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr Salary per annum Contact details Marital status Relation to learner	Single Biological parent Other (Specify)	CASE	Grandparent		Step parent		married Court app guardian Copy of lega guardianship	o must	ument proving t be submitted	
т.	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr Salary per annum Contact details Marital status	Single Biological parent Other (Specify)	CASE	Grandparent		Step parent		married Court app guardian Copy of lega guardianship	o must	ument proving t be submitted	
	Identity number Physical home address Occupation Name of employer Employer's physical address Employee's number/Persal nr Salary per annum Contact details Marital status Relation to learner PARENTS DETAILS, NEXTITLE Surname	Single Biological parent Other (Specify)	CASE	Grandparent OF EMERGENG		Step parent E SCHOOL CANN		married Court app guardian Copy of lega guardianshi	o must	ument proving t be submitted	
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	Medical Aid Name	
MEDICAL FORMATION	Membership number	Telephone number
EDIC/ RMA	Principal member	Dependant code
ME	Name of Doctor	Telephone number
	Medical condition / Allergies	

ARRANGEMENTS FOR THE PAYMENT OF SCHOOL FEES

Berlin High School is declared as a FEE-PAYING SCHOOL in terms of the relevant legislature, and that by enrolling your son/daughter at the school, you are accepting an obligation to contribute financially towards the education he/she receives. School fees are payable as per the terms adopted by the majority of the parents at the Annual General Meeting of parents.

These options may change year upon year upon finalisation of the school's budget. Please choose your preferred way of payment.

1.	Instalments – The school fees are due in full and are payable on the first day of the new school year unless one of the following options are selected (Please tick the appropriate block.)
	1.1 Pay in full by 31 January – less 10% discount is given
	1.2 Pay in 10 equal monthly instalments commencing on 31 January and ending 31 October.
2.	Fees are payable via the following methods: (Please tick the appropriate block.)
	2.1 By signing a debit order at your bank
	2.2 Via electronic transfer / Direct bank payment
	2.3 Via speed point with the bursar at school
	2.4 Via cash with the bursar at school

DECLARATION AND UNDERTAKING BY BIOLOGICAL PARENTS / LEGAL GUARDIANS

In my personal capacity, I the undersigned biological parent / legal guardian of the abovementioned child, hereby declare that I am legally entitled to make this application and all information furnished in this application form is to the best of my knowledge complete and correct and I undertake to inform the school of any changes in the respect of this information.

I acknowledge and agree that acceptance of this application will result in a valid and binding agreement between the school and myself, the terms and conditions of which shall be as follows:

- 1. To give notice not less than one school quarter in advance of my intention to remove my child from the school, except in cases where the committee has accepted shorter notice and, if I fail to comply herewith, to accept liability for the full school quarter in respect of which notice should have been given.
- 2. To pay the school fees as determined by the Governing Body at the beginning of each year unless prior arrangements are made with the Principal.
- 3. I am aware of the school fees which are presently levied by the Governing Body in terms of Section 39 of the SA School Act and I undertake to pay the school fees as may be determined by the Governing Body of the school from time to time. I furthermore acknowledge that should I be in breach of the agreement by failing and/or neglecting to make such payment of such school fees
 - a) The Governing Body shall be entitled in terms of Section 40 of the SA Schools Act to take legal action against me as it may deem fit in this regard. In event of a default payment of school fees, the full annual school fees become due and payable.
 - b) I choose as my domicillium citandi et executandi either of the addresses referred to in this application.

- c) To pay any cost on an Attorney and Client Scale, including collection commission which should arise in the event of the school having to institute legal action for non-payment of fees.
- 4. Take note that both biological parents/legal guardians are responsible for paying school fees.
- 5. The biological parent/legal guardian declares that he/she is entitled to sign this document, and shall be responsible financially in their personal capacities.
- 6. I/We hereby certify that I/we have legal custody and/or legal guardianship in respect of the child and the copies of the courtroom documents have been submitted with this application.
- 7. We understand and confirm that the medium of instruction in this school is English.
- 8. The school may conduct an enquiry and/or information search about the biological parents/legal guardians with a credit information bureau, persons acting as their agents and/or credit grantors.
- 9. The school may transmit details of how the biological parents/legal guardians have performed in meeting their obligation in terms of their school fee obligations and share such information with other credit grantors for the purpose of making any credit risk management related decisions.
- 10. If the biological parents/legal guardians fail to meet their school fee obligations, the school may record the biological parents/legal guardian's non-performance with a credit information bureau. Any information conveyed to a credit information bureau will be available to other credit grantors and used in making credit risk management related decisions.

SIGNATURE OF BIOLOGICAL FATHER		DATE:	
SIGNATURE OF BIOLOGICAL MOTHER	}	DATE:	
SIGNATURE OF LEGAL GUARDIAN 1		DATE:	
SIGNATURE OF LEGAL GUARDIAN 2		DATE:	
Whilst every effort is made to ensure the any loss or damage irrespective of how s	safety of the personal property of learners, the Gove uch loss or damage is caused.	erning Body	does not accept liability for