



APPLICATION FOR ENROLMENT

YEAR:

SURNAME OF LEARNER:

NAME OF LEARNER:

GR. FOR WHICH APPLICATION IS SUBMITTED.....

LANGUAGE:.....

FOR OFFICE USE

DATE FOR INTERVIEW
TIME:
TESTS REQUESTED:
CALL PARENTS WITH RESULT:
FAX TO DURBANVILLE:
CLASS LIST UPDATED:

NOTES

CURRO HAZELDEAN PRIVATE SCHOOL

The application procedure:

1. Collect an application pack from the school or download from the website.
2. Complete the application forms and obtain the other items required (see application).
3. Deliver the fully completed application to the school.
4. We may contact you for an interview appointment.
5. After the interview our selection panel will consider the application.
6. We will inform you as soon as possible once a decision has been reached.

Some important points to remember:

1. Admission is not automatic.
2. Incomplete applications will not be considered. Please note the documentation required listed on the application form.
3. No interview will be granted until a recent report has been received from the previous school.
4. Preference will be given to pupils whom we feel will benefit from the Curro experience.
5. We will not consider pupils who are not prepared to work within the Curro ethos, culture and boundaries.

School fees are due for 12 months

Rates as for 2009 – annual update in November

Grade R - 0: R1 345 per month

Grade 1 – 3: R1 455 per month

Grade 4 – 6: R1 675 per month

Grade 7 – 9: R2 010 per month

ENROLMENT FEE

To be paid after application has been approved. Not refundable when the learner leaves school.

Gr. R – 7: R4 000

Gr. 8 & 9: R3 500

All financial enquiries and proof of payment to Curro Durbanville:

021 9756377 engela@curro.co.za

SECTION B: PREVIOUS SCHOOLS

SCHOOL 1 _____

SCHOOL 2 _____

NAME OF PRINCIPAL : _____


NAME OF PRINCIPAL : _____


ADDRESS _____

ADDRESS _____

_____ CODE: _____

_____ CODE: _____

 _____

 _____

LAST GRADE PASSED : _____ IN WHICH YEAR : _____ WHICH GRADE HAS BEEN REPEATED : _____

HAS ADMISSION TO ANY OTHER SCHOOL EVER BEEN REFUSED :

Yes

No

ACHIEVEMENTS:

Academic	Co-curricular	Other

SECTION C: MEDICAL INFORMATION

ALLERGIES : _____

SPECIAL NEEDS : _____

FAMILY DOCTOR 1 _____ Tel No (____) _____

FAMILY DOCTOR 2 _____ Tel No (____) _____

MEDICAL AID COMPANY _____

MEDICAL AID MEMBERSHIP NUMBER _____

Has the student received all the necessary immunisation? Yes / No (If not, please give details) _____

Student has suffered the following illnesses : (indicate with an X)

Asthma
 Chicken Pox
 Diabetis
 Diphtheria

Enteric Fever
 German Measles
 Hepatitis
 Malaria

Measles
 Mumps
 Poliomyelitis
 Rheumatic Fever

Scarlet Fever
 Tickbite Fever
 Typhoid Fever
 Whooping Cough

SECTION C (continued)

Does student suffer from any other illnesses or disability or **has learner suffered** from any other illnesses or disability?

(If so, please give details) _____

Is student at present receiving medical treatment for any condition? (If so, please state) _____

Has student suffered from or been treated for any psychological or emotional upset? (If so, please provide details) _____

Has student had any operations? (If so, please state) _____

Please specify any other relevant medical data _____

CONSENT

NB: IN A CRITICAL SITUATION, PLEASE BEAR IN MIND THAT THERE MAY NOT BE TIME TO REFER TO YOUR CHILD'S RECORDS. THE SCHOOL THEREFORE RESERVES THE RIGHT TO UTILISE THE QUICKEST MEDICAL SERVICE AVAILABLE.

I, _____, being the parent/legal guardian of _____ hereby agree that the appointed Curro Private School Practitioner may carry out emergency treatment as may be necessary.

Signature of Parent / Guardian : _____

DETAILS OF ALL CHILDREN IN YOUR CARE WHO ARE CURRENTLY AT THIS SCHOOL

NAMES of brothers		GRADE	NAMES of sisters		GRADE
1			1		
2			2		
3			3		
4			4		

SCHOOL FEES STRUCTURE

Please mark your choice with an **X**

0

Monthly

Quarterly

Annually

School fees are payable over 12 months (2007) (Fees as for 2008 – annual upgrade in November)

Grades R & O	R1 200,00	Grades 1 – 3	R1 300,00
Grades 4 - 6	R1 500,00	Grades 7-8	R1 800,00

ENROLMENT FEES

Paid on registration of learner and is non-refundable when learner leaves the school

R4000

SECTION D: DETAILS OF ACCOUNT HOLDER

SURNAME	FULL NAMES															
DESIGNATION :	<table border="1" style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="width: 10%;">Mr</td> <td style="width: 10%;">Mrs</td> <td style="width: 10%;">Ms</td> <td style="width: 10%;">Miss</td> <td style="width: 10%;">Dr</td> <td style="width: 10%;">Rev</td> <td style="width: 10%;">Capt</td> <td style="width: 10%;">Col</td> <td style="width: 10%;">Prof</td> <td style="width: 10%;">Rev</td> <td style="width: 10%;">The Hon</td> </tr> </table>	Mr	Mrs	Ms	Miss	Dr	Rev	Capt	Col	Prof	Rev	The Hon				
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OCCUPATION :	EMPLOYER :															
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E-mail:																
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SECTION E : DETAILS OF FATHER / STEPFATHER / GUARDIAN

SURNAME	FULL NAMES															
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CURRO HAZELDEAN

GENERAL INDEMNITY:

The school and Directors undertake to set reasonable and generally accepted safety standards for all school activities regarding the safety of learners, teachers and visitors.

However, the Directors cannot be held responsible for accidents which may occur in the class, on the school premises or the sports fields.

Each parent is requested to complete the form below to state that the position of the Directors is understood and that the risks involved are accepted.

I, the undersigned,

Full Names:

Address:

Tel Numbers:.....

The parent or guardian of the following learner/s who have been enrolled and accepted at Curro Private School, Silver Lakes Street, Hazeldean, subject to the conditions stated above:

Name/s of learners/s:

.....
.....

hereby indemnify the Curro Holdings (Pty) Ltd (Reg. No. 1998/025801/07) and the Directors in the time of the Curro Holdings (Pty) Ltd for any general losses or damages, however they may occur, which I, as parent or guardian of the above-mentioned learner may suffer, as the result of any contingency involving my child, be it as the causative or suffering party, whilst participating in school activities.

In particular, I authorise that the abovementioned learner may participate in all normal activities usually associated with a similar excursion, and I give my consent that he/she may make use of the transport arranged by the school for the excursion. I also indemnify the school and the Directors for any damages or losses that I, as parent or guardian of the learner in question, may suffer under such circumstances and voluntarily accept all the risks associated therewith.

SIGNED AT **ON THIS** **DAY OF**

WITNESSES:

1.....

2.....

.....
PARENT / GUARDIAN